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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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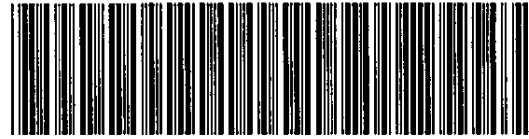
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Medical Imaging Solutions Group, Inc. of Texas

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Vivian R Bates

Name of Person

Medical Imaging Solutions Group, Inc. of Texas

Firm/Company

229 Arnold Mill Road, Suite 100

Address

Woodstock, GA 30188

City/State and Zip code

vbates@medicalimaginggroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vivian R Bates

Name of Person

at (770) 592-9191

Area Code & Daytime Telephone Number

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STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Medical Imaging Solutions Group, Inc. of Texas
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Texas 3. 02-0584110
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/04/2002 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon registration
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 229 Arnold Mill Road, Suite 100, Woodstock, GA 30188
(Principal office address)

229 Arnold Mill Road, Suite 100, Woodstock, GA 30188
(Current mailing address)

8. To engage in any and all businesses permitted
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: InCorp Services, Inc.

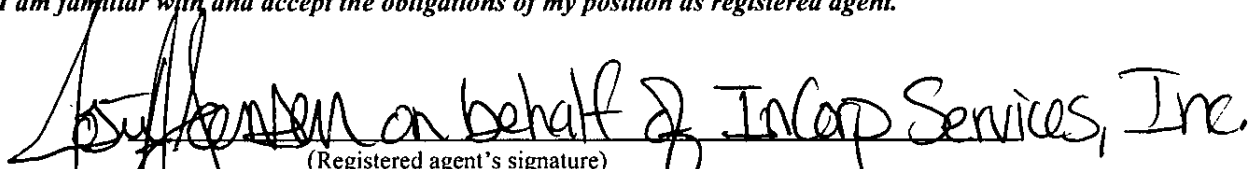
Office Address: 17888 67th Court North

Loxahatchee, Florida 33470
(City) (Zip code)

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TALLAHASSEE FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Arnold L Bates

Address: 229 Arnold Mill Road, Suite 100
Woodstock, GA 30188

Vice Chairman: _____

Address: _____

Director: Vivian R Bates

Address: 229 Arnold Mill Road, Suite 100
Woodstock, GA 30188

Director: _____

Address: _____

B. OFFICERS

President: Arnold L Bates

Address: 229 Arnold Mill Road, Suite 100
Woodstock, GA 30188

Vice President: _____

Address: _____

Secretary: Vivian R Bates

Address: 229 Arnold Mill Road, Suite 100, Woodstock, GA 30188

Treasurer: Vivian R Bates

Address: 229 Arnold Mill Road, Suite 100, Woodstock, GA 30188

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. *Arnold Bates, CFO*

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Vivian R Bates, Secretary

(Typed or printed name and capacity of person signing application)

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Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



John Steen
Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles of Incorporation for Medical Imaging Solutions Group, Inc. of Texas (file number 800060345), a Domestic For-Profit Corporation, was filed in this office on March 04, 2002.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on March 07, 2013.



A handwritten signature in black ink, appearing to read "John Steen".

John Steen
Secretary of State

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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