

600384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

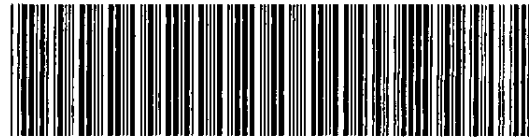
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Am 6/22/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: RADIOLOGY ASSOCIATES OF SOUTH FLORIDA, I

DOCUMENT NUMBER: 600384

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DENNIS WISEMAN

Name of Contact Person

Firm/ Company

8900 N. KENDALL DRIVE

Address

MIAMI, FL 33176

City/ State and Zip Code

DWISEMAN@RAS.F.NET

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

For further information concerning this matter, please call:

DENNIS WISEMAN

Name of Contact Person

at (786) 596-1684

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed)

Mailing Address

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

Street Address

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2011

DENNIS WISEMAN
8900 N. KENDALL DRIVE
MIAMI, FL 33176

SUBJECT: RADIOLOGY ASSOCIATES OF SOUTH FLORIDA, P.A.
Ref. Number: 600384

We have received your document for RADIOLOGY ASSOCIATES OF SOUTH FLORIDA, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The first page of your document is missing. Please find enclosed a new first page.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 211A00011039

Articles of Amendment
to
Articles of Incorporation
of

RADIOLOGY ASSOCIATES OF SOUTH FLORIDA, PA

(Name of Corporation as currently filed with the Florida Dept. of State)

600384

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8900 N. KENDALL DRIVE

MIAMI, FL 33176

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

DENNIS WISEMAN

New Registered Office Address:

8900 N. KENDALL DRIVE

(Florida street address)

MIAMI

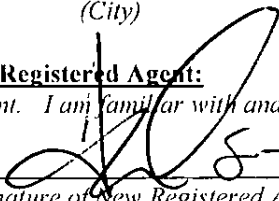
(City)

Florida 33176

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New Registered Agent, if changing

RADIOLOGY ASSOCIATES OF SOUTH FLORIDA, PA

AMENDMENT OF OFFICERS AND DIRECTORS

KEVIN ABRAMS, MD 8900 N. KENDALL DRIVE MIAMI, FL 33176	VP, D	PEDRO FERNANDEZ, MD SAME ADDRESS	VP
AIMEE AGUIAR, MD SAME ADDRESS	VP	JONATHAN FIELDS, MD SAME ADDRESS	VP
MANUEL ALONSO, MD SAME ADDRESS	VP	ADAM GERONEMUS, MD SAME ADDRESS	VP
AVINASH BALKISSOON, MD SAME ADDRESS	VP, D	JAMES GREVE, MD SAME ADDRESS	VP
JULIO BAQUERO, MD SAME ADDRESS	VP, D	PRASUNA INAMPUDI, MD SAME ADDRESS	VP
BRUCE BAUER, MD SAME ADDRESS	VP	WARREN JANOWITZ, MD SAME ADDRESS	VP
JAMES BENENATI, MD SAME ADDRESS	VP, D	BARRY KATZEN, MD SAME ADDRESS	VP, D
IRA BRAUN, MD SAME ADDRESS	VP, D	STEPHANIE LAFOSSE-MARIN, MD SAME ADDRESS	VP, D
MARGARET CHANELES, MD SAME ADDRESS	VP	ITALO LINFANTE, MD SAME ADDRESS	VP
ABILIO COELLO, MD SAME ADDRESS	VP	KIRSTEN LUEDEMANN, MD SAME ADDRESS	VP, D
RICARDO CURY, MD SAME ADDRESS	P, D	IVAN MALAVE-VIDAL, MD SAME ADDRESS	VP
JUAN CARLOS DIEZ, MD SAME ADDRESS	VP, D	MARIA PILAR MARTINEZ, MD SAME ADDRESS	VP
LAWRENCE ELGARRESTA, MD SAME ADDRESS	VP, D	JONATHAN MESSINGER, MD SAME ADDRESS	VP, D

RADIOLOGY ASSOCIATES OF SOUTH FLORIDA, PA
AMENDMENT OF OFFICERS AND DIRECTORS
CONTINUED – PAGE 2 OF 2

NEIL MESSINGER, MD SAME ADDRESS	D
VICTOR PARRILLA, MD SAME ADDRESS	VP
CONSTANTINO PENA, MD SAME ADDRESS	VP
ANN PODRASKY, MD SAME ADDRESS	VP
ALEX POWELL, MD SAME ADDRESS	VP, D
ANTONIO RABASSA, MD SAME ADDRESS	VP
MYER ROSZLER, MD SAME ADDRESS	VP
IGNACIO RUA, MD SAME ADDRESS	VP, D
JONATHAN RUBIN, MD SAME ADDRESS	VP
SHAUN SAMUELS, MD SAME ADDRESS	VP
CLIFF STAMLER, MD SAME ADDRESS	VP
ANTHANASSOIS TSOUKAS, MD SAME ADDRESS	VP
HAO VOUNG, MD SAME ADDRESS	VP, D

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	PLEASE SEE ATTACHED.	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 4/19/11
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

- ☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

4/19/11

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Dennis Wisman
(Typed or printed name of person signing)

Exec. Mgr. Director
(Title of person signing)