# £0,00000000

#### TRANSMITTAL LETTER

_	tion Section of Corporations
SUBJECT:	American Diagnostic Medicine, Inc.
SUBJECT:	(Name of corporation - must include suffix)
Dear Sir or Mada	am:
	pplication by Foreign Corporation for Authorization to Transact Business in Florida", xistence", and check are submitted to register the above referenced foreign corporation to in Florida.
Please return all	correspondence concerning this matter to the following: -08/21/0001135001
-	Stephen D. Garvin
	(Name of Person)
. <b></b>	American Diagnostic Medicine, Inc.
	(Firm/Company)
	960 Industrial Dr., Suite 7
-	(Address)
	Elmhurst, IL 60126
-	(City/State/Zip)
	to call someone concerning this matter, please call:
	en D. Garvin at (630 ) 334-7100  (Area Code & Daytime Telephone Number)
(Name (	(Alea Code & Daytille Telephone Number)
Name Availability	
Documen Registration Sect Examiner Division of Gogo 409 E. Gaines St.	orations Division of Corporations
Updater Tallahassee, FEC	32399 Tallahassee, FL 32314
Verifyer DCC	ck for the following amount:
Acknowledgement DCC	Fee

E0100000003039



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 25, 2000

STEPHEN D. GARVIN AMERICAN DIAGNOSTIC MEDICINE, INC. 960 INDUSTRIA DR., SUITE 7 ELMHURST, IL 60126

SUBJECT: AMERICAN DIAGNOSTIC MEDICINE, INC.

Ref. Number: W00000020956

We have received your document for AMERICAN DIAGNOSTIC MEDICINE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 200A00045624

### 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. American Diagnostic Medicine (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) (State or country under the law of which it is incorporated)
(State or country under the law of which it is incorporated)
(Date of incorporation)

3. 36-3351715

(FEI number, if applicable)

(Duration: Year corp. will cease to exist or "perpetual" (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") fransacted business in Florida. If corporation has not transacted business in Florida, insert upon qualification.)

(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

3404 No. Lecanto Highway Beverly Hills FL 34465

(Principal office address)

(Principal office address)

(Current mailing address)

Long office nuclear imaging at clinic

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address or France.

Name: Stephen D. Garvin

Clo 3404 No. Lecanto Highway

Beverly Lills , Florida 3446.

(Zip code) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) 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 Samuel Kancherlapalli Chairman: Dr. Suite 7 Address: Vice Chairman Address: 60302 Oak Park TI Director: \_\_ Address: -SAME -B. OFFICERS President: Address: -Same-Vice President: Address: Garvin Stephen D. Address: \_ Treasurer: Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Steplen R. Jan (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Stephen D. Garvin, CFO (Typed or printed name and capacity of person signing application)



#### To all to whom these Presents Shall Come, Greeting

I, Jesse White, Secretary of State of the State of Illinois, do

hereby certify that

DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JANUARY 18, 1985, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS\*



#### In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this \_\_\_\_\_ day of \_\_\_\_\_\_ DECEMBER A.D. \_\_\_\_\_2000