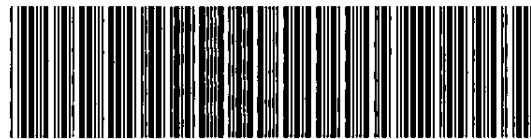


FO4000004148



200185264652

09/13/10--01025--013 **52.50

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
10 OCT 14 PM 4:01

cc/cus

Name chg
@ 10/14/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: American Radiological Nurses Association, Inc.
Name of Corporation

DOCUMENT NUMBER: F04000004148

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Harriet McClung
Name of Contact Person

Dancy Association Management Company
Firm/Company

7794 Grow Drive
Address

Pensacola, FL 32514
City/State and Zip Code

harriet.mcclung@dancyamc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harriet McClung at (850) 637-1770
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 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

September 15, 2010

HARRIET MCCLUNG
DANCY ASSOCIATION MANAGEMENT COMPANY
7794 GROW DRIVE
PENSACOLA, FL 32514

SUBJECT: AMERICAN RADIOLOGICAL NURSES ASSOCIATION, INC.
Ref. Number: F04000004148

We have received your document for AMERICAN RADIOLOGICAL NURSES ASSOCIATION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 810A00021920

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 OCT 14 AM 8:52

RECEIVED

**NOT FOR PROFIT CORPORATION
APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION TO FILE
AMENDMENT TO APPLICATION FOR CONDUCTING AFFAIRS IN FLORIDA**
(Pursuant to s. 617.1504, F.S.)

**SECTION I
(1-3 MUST BE COMPLETED)**

F04000004148

(Document Number of Corporation (If known))

1. American Radiological Nurses Association, Inc
(Name of corporation as it appears on the records of the Department of State)
2. _____ 3. _____
(Incorporated under laws of) (Date authorized to conduct affairs in Florida)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OCT 14 4 40 PM '09

**SECTION II
(4-8 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? June 18, 2009

5. Association for Radiologic and Imaging Nursing, Inc.
(Name of corporation after the amendment, adding suffix "corporation," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation. "Company," or "Co.," may not be used as a corporate suffix by a nonprofit corporation)

6. If the amendment changes the period of duration, indicate new period of duration and the date the change was effected.

_____ (New duration) _____ (Date)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction and the date the change was effected.

_____ (New jurisdiction) _____ (Date)

8. If the purpose which the corporation intends to pursue in Florida has changed, indicate new purpose.

(The corporation is authorized to pursue such purpose in the jurisdiction of its incorporation)

9. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Harriet McClung
(Signature of the chairman or vice chairman of the board, president, or other officer - if in the hands of a receiver, trustee, or other court-appointed fiduciary, by that fiduciary)

Harriet McClung
(Typed or printed name of the person signing)

Executive Director
(Title of person signing)

Association for Radiologic & Imaging Nursing
Formerly
American Radiological Nurses Association
7794 Grow Drive
Pensacola, FL 32514
(850) 474-7292
(850) 484-8762 Fax
arin@dancyamc.com
www.arinursing.org



MEMO

To: Amendment Section
Florida Department of State, Division of Corporations

From: Harriet McClung
Harriet.mcclung@dancyamc.com
888-637-1770

Re: Submission of Name Change Amendment Documentation

Date: October 13, 2010

Enclosed please find the follow up information that was requested for the application by a foreign not for profit corporation to file amendment to application for conducting affairs in Florida. The following documentation is enclosed:

1. Cover letter and amended application
2. Original certificate from state of Maryland documenting name change is in effect, issued in the past 30 days.

I have included the letter I received from the initial submission of the amendment request as a reference. The fee of \$52.50 is on file and this is being submitted with in the stated 60 days. Please let me know if there is anything else you need to complete the name change.

ARTICLES OF REVIVAL

FOR

American Radiological Nurses Association, Inc.

(Insert exact name of corporation as it appears on records of the State Department of Assessments and Taxation)

FIRST: The name of the corporation at the time the charter was forfeited was _____

American Radiological Nurses Association, Inc

SECOND: The name which the corporation will use after revival is _____

Association for Radiologic and Imaging Nursing, Inc.

THIRD: The address of the principal office in this state is _____

THE C/O Corporation Trust Incorporated, 300 East Lombard Street, Baltimore, MD 21202

FOURTH: The name and address of the resident agent is _____

THE Corporation Trust Incorporated, 300 East Lombard Street, Baltimore, MD 21202

FIFTH: These Articles of Revival are for the purpose of reviving the charter of the corporation.

SIXTH: At or prior to the filing of these Articles of Revival, the corporation has (a) Paid all fees required by law; (b) Filed all annual reports which should have been filed by the corporation if its charter had not been forfeited; (c) Paid all state and local taxes, except taxes on real estate, and all interest and penalties due by the corporation or which would have become due if the charter had not been forfeited whether or not barred by limitations.

STATE OF MARYLAND

I hereby certify that this is a true and complete copy of the _____ page document on file in this office. DATED: _____

STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

BY: *[Signature]* _____, Custodian



This stamp replaces our previous certification system. Effective: 6/95

I hereby consent to my designation in this document as resident agent for this corporation, **Marc St. Pierre**
Vice President and Assistant Secretary

SIGNED 
Resident Agent

(Use A for signatures. If that procedure is unavailable, use B. If A & B are not available, use C. ONLY SIGN UNDER ONE SECTION.)

A. The undersigned who were respectively the last acting president (or vice president) and secretary (or treasurer) of the corporation severally acknowledge the Articles to be their act.


Last Acting President/Vice President

Last Acting Secretary/Treasurer

(Use if A cannot be signed/acknowledged)

B. The last acting president, vice president, secretary, and treasurer are unwilling or unable to sign and acknowledge these Articles; therefore, the undersigned who represent the lessor of a majority or 3 of the last acting directors of the corporation severally acknowledge the Articles to be their act.

Last Acting Director

Last Acting Director

Last Acting Director

(Use if A and B cannot be signed/acknowledged)

C. The last acting president, vice president, secretary, and treasurer of the corporation are unable or unwilling to sign the Articles. There are less than the required number of directors able and willing to sign the Articles, therefore, the undersigned who were elected as directors for the purpose of reviving the charter of the corporation severally acknowledge the Articles to be their act.

Director

Director

Director

CUST ID: 0002294297
WORK ORDER: 0001737335
DATE: 06-18-2009 12:34 PM
AMT. PAID: \$150.00

CORPORATE CHARTER APPROVAL SHEET

****EXPEDITED SERVICE****

**** KEEP WITH DOCUMENT ****

DOCUMENT CODE 18B/A BUSINESS CODE 04

W 01512904

Close _____ Stock _____ Nonstock

P.A. _____ Religious _____

Merging (Transferor) _____

Surviving (Transferee) _____



ID # D01512904 ACK # 1000361998194181
PAGES: 0003
ASSOCIATION FOR RADIOLOGIC AND IMAGING
NURSING, LLC

06/18/2009 AT 10:50 A MO # 0001737335

New Name Association for Radiologic and Imaging Nursing, Inc.

FEES REMITTED

Base Fee: 100
Org. & Cap. Fee: _____
Expedite Fee: 50
Penalty: _____
State Recordation Tax: _____
State Transfer Tax: _____
Certified Copies _____
Copy Fee: _____
Certificates _____
Certificate of Status Fee: _____
Personal Property Filings: _____
Mail Processing Fee: _____
Other: _____

TOTAL FEES: 150

Change of Name
 Change of Principal Office
 Change of Resident Agent
 Change of Resident Agent Address
 Resignation of Resident Agent
 Designation of Resident Agent and Resident Agent's Address
 Change of Business Code
 Adoption of Assumed Name
 Other Change(s)

Credit Card _____ Check Cash _____

_____ Documents on _____ Checks

Approved By: [Signature]
Keyed By: [Signature] STWORK
COMMENT(S):

Code 007

Attention: _____

Mail: Name and Address _____

THE CORPORATION TRUST INCORPORATED
300 E LOMBARD ST.
SUITE 1400
BALTIMORE MD 21202-3219

06-09
not file

Stamp Work Order and Customer Number HERE

CUST ID: 0002294297
WORK ORDER: 0001737335
DATE: 06-18-2009 12:34 PM
AMT. PAID: \$150.00