

F07000004576

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T. BROWN

R.A.



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 489685 7914531

AUTHORIZATION :

*Spudde man*

COST LIMIT : \$ 35.00

ORDER DATE : January 9, 2013

ORDER TIME : 4:09 PM

ORDER NO. : 489685-004

CUSTOMER NO: 7914531

CHANGE OF AGENT

NAME: FAIRFAX IMAGING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS: \_\_\_\_\_

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Virginia in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: FAIRFAX IMAGING, INC.
2. The principal office address: 5215 W. Laurel Street, Suite 110, Tampa, FL 33607
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/12/2007 Document number: F07000004576
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Tony Christofano

5215 W. Laurel Street Suite 110

Tampa, FL 33607

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

P.O. Box NOT acceptable

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Maureen Cathell  
Signature of an officer or director

Maureen Cathell, Vice President  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Corporation Service Company

By: Sylvia Queppet  
Signature of Registered Agent

01/07/2013

Date

If signing on behalf of an entity:

Sylvia Queppet, Asst. Vice President

Typed or Printed Name

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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