

F14 000001389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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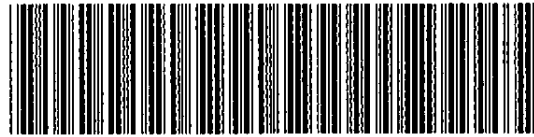
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2014 MAR 27 AM 10:51  
SUFFICIENT FILING

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAR 27 PM 1:52

3/28/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 072253 4347023

AUTHORIZATION :

COST LIMIT

\$ 78.75

ORDER DATE : March 26, 2014

ORDER TIME : 9:51 AM

ORDER NO. : 072253-005

CUSTOMER NO: 4347023

FOREIGN FILINGS

NAME: SENTINEL DIGNOSTIC IMAGING  
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
XX        CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

**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. Sentinel Diagnostic Imaging Inc.  
(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. Delaware 3. 46-4835559  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/14/2014 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. c/o Florida Innovation Hub, 747 SW 2nd Ave., IMB #20, Suite 244, Gainesville, Flc 32601  
(Principal office address)

714 Saddlebrook Drive, Colleyville, Texas 76034

(Current mailing address)

8. the transaction of any and all lawful business for which Delaware for-profit corporations may be organized  
(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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

**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.*

Corporation Service Company

Don G. Knight  
Assistant Vice President

By: [Signature]  
(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.

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

**A. DIRECTORS**

Chairman: David Meadows  
714 Saddlebrook Drive  
Address: Colleyville, Texas 76034

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: David Meadows  
714 Saddlebrook Drive  
Address: Colleyville, Texas 76034

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

**B. OFFICERS**

President: David Meadows  
714 Saddlebrook Drive  
Address: Colleyville, Texas 76034

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: David Meadows  
714 Saddlebrook Drive, Colleyville, Texas 76034  
Address: \_\_\_\_\_

Treasurer: David Meadows  
714 Saddlebrook Drive, Colleyville, Texas 76034  
Address: \_\_\_\_\_

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

13.   
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. David Meadows, President  
(Typed or printed name and capacity of person signing application)

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENTINEL DIAGNOSTIC IMAGING INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SENTINEL DIAGNOSTIC IMAGING INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF FEBRUARY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5482140 8300

140385576

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1242488

DATE: 03-26-14