F1800003178

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nar	me)
(Do	ocument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	_

Office Use Only



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JUL 1 2018



June 29, 2018

TRACY L WALKER 1746 COLE BLVD, STE 150 LAKEWOOD, CO 80401 US

SUBJECT: DIVERSIFIED RADIOLOGY OF COLORADO, PC

Ref. Number: W18000060471

We have received your document for DIVERSIFIED RADIOLOGY OF COLORADO, PC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

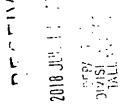
The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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) 245-6051.

Judy A Leggett Regulatory Specialist II Registration Section

Letter Number: 518A00013596



COVER LETTER

	tration Secti					
SUBJECT:	•	Radiology of Colo	rado, PC			
SUBJECT		Name o	f corporation	- must i	nclude suffix	
Dear Sir or M	ladam:					
"Certificate o	f Existence."		of Good Stan	ding" ar	id check are sub	ct Business in Florida," omitted to register the
Please return Tracy L. Walk	·	idence concernir	ig this matter	to the fo	ollowing:	
			Name of I	Person		
Diversified Ra	diology of Co	lorado, PC				
			Firm/Com	pany		-
1746 Cole Bou	alevard, Suite	150				
			Addre	:SS		
Lakewood.CO	80401					
			City/State at	nd Zip c	ode	
twalker@divra	id.com					
		E-mail address:	(to be used f	or future	annual report	notification)
For further in	formation co	ncerning this ma	atter, please c	all:		
Tracy L. Walker		303	716	716-3776		
Nam	e of Person	·	at (Area Code) e	Daytime Telep	hone Number
STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		: :		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a	check for th	e following amo	unt:			
■ \$70.00 Fil	ling Fee	□ \$78.75 Filing Certificate o			Filing Fee & ed Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

	corporation; must include "INCORPORATED," Corp." "Inc." "Co." or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting h	ousiness in Florida)
Colorado	·	8.1.1156388	
(State or count	ry under the law of which it is incorporated)	(FEI number, if appli	cable)
1001			
(Date	5. e of incorporation)	(Date of duration, if other tha	ın perpetual)
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		· <u> </u>
	(SEE SECTIONS 607.1501 & 607.150 avard, Suite 150 Lakewood, CO 80401		
	(SEE SECTIONS 607.1501 & 607.150 evard, Suite 150 Lakewood, CO 80401		
	(SEE SECTIONS 607.1501 & 607.150 evard, Suite 150 Lakewood, CO 80401	02, F.S., to determine penalty liability)	. 18
	(SEE SECTIONS 607.1501 & 607.150 evard, Suite 150 Lakewood, CO 80401 (Principa	02, F.S., to determine penalty liability)	. 18
	(SEE SECTIONS 607.1501 & 607.150 evard, Suite 150 Lakewood, CO 80401 (Principal) (Current mailing)	O2, F.S., to determine penalty liability) all office address) g address, if different)	18 1111 1
	(SEE SECTIONS 607.1501 & 607.1501 evard, Suite 150 Lakewood, CO 80401 (Principal (Current mailing et address of Florida registered agent: (P.O.)	O2, F.S., to determine penalty liability) all office address) g address, if different)	18 JUL 1
	(SEE SECTIONS 607.1501 & 607.150 evard, Suite 150 Lakewood, CO 80401 (Principal) (Current mailing)	O2, F.S., to determine penalty liability) all office address) g address, if different)	18 111 1
Name and <u>stre</u> Name:	(SEE SECTIONS 607.1501 & 607.1501 evard, Suite 150 Lakewood, CO 80401 (Principal (Current mailing et address of Florida registered agent: (P.O.)	O2, F.S., to determine penalty liability) all office address) g address, if different)	18 JUL 11 PM
Name and <u>stre</u>	(SEE SECTIONS 607.1501 & 607.150 evard, Suite 150 Lakewood, CO 80401 (Principal (Current mailing et address of Florida registered agent: (P.O Smitha Sonni 2921 Lakeview Drive Sebring	O2, F.S., to determine penalty liability) all office address) g address, if different)	18 111 1

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.

10. 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.

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

A. DIRI	ECTORS
Chairman	
Address:	
Vice Chai	rman:
Address:	
Director:	Eric Lyders, M.D.
	1746 Cole Boulevard, Suite 150 Lakewood, CO 80401
Director:	Hari Reddy M.D.
	1746 Cole Boulevard, Suite 150 Lakewood, CO 80401
B. OFF	ICERS
President:	Sean O. Bryant, M.D.
	1746 Cole Boulevard, Suite 150 Lakewood, CO 80401
	Jennifer Kemp. M.D.
Vice Pres	ident:
Address:	1740 Cole Boulevard, Suite 130 Lakewood, CO 80401
	Matthew Schmitz, M.D.
Secretary	1746 Cole Boulevard, Suite 150 Lakewood, CO 80401
Address:	Matthew Schmitz, M.D.
Treasurer	1746 Cole Boulevard, Suite 150 Lakewood, CO 8040
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or directors, y Stevens, M.D. 1746 Cole Boulevard, Suite 150 Lakewood, CO 80401
The office are true a third do	Signature of Director or Officer per or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes begree felony as provided for in s.817.155, F.S. a O. Bryant, M.D., President
13.	(Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

DIVERSIFIED RADIOLOGY OF COLORADO, P.C.

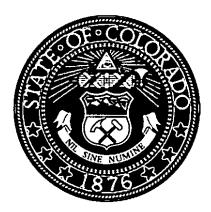
is a

Corporation

formed or registered on 01/11/1991 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19911002154.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/15/2018 that have been posted, and by documents delivered to this office electronically through 06/20/2018 @ 11:50:40 -

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 06/20/2018 @ 11:50:40 in accordance with applicable law. This certificate is assigned Confirmation Number 10964958



William. Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co/us/biz/Certificate/SearchCriteria.do/entering/the/certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely

optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http:// www.sos.state.co.us/click "Bustnesses, trademarks, trade names" and select "Frequently Asked Questions."