a .	PĹ	EASE READ A	ALL INSTR	UCTI	ONS BEFORE C	OMPLETI	NG TI	HIS EORM	FD	
	PORATION		FLORIDA DE Sec	EPART cretary	TMENT OF STATE y of State orporations		(07 HAY 29	AM 9: 0	TE.
DOCUMENT # F94000004928 1. Corporation Name Med Images, Inc.							TA	SZARAJA	<u>:E, FLUM</u>	IUA
Whea	d Inva	ges -						10422 01054		8 1050.00
				Exec	sutive Park Dr	REINSTATEMENT				
Suite, Apt. #,	110		Suite, Apt. #, etc. C-110 City & State			4. Date incorport To Do Busin	orated or	Qualified	712219	
Knoxville TN Zip Country			KNCKVILLE TN Zip Country			5. FEI Number Applied For の4・3369982 Not Applicable 6. 5375				
379		USA	3792	3	USA	CERTIFICATE	OF STATU	IS DESIRED S8	3.75 Additional F for a Certificate	Fee required of Status
	red Agent									
	Suite, Apt. #, El						State	Zip Code		
	We	stin					FL	3333		<u> </u>
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 or 617.0503, F.S. Signature of Registered Agent NRAI Services Inc. Organization Date 5/22/07 REGISTERED AGENT MUST SIGN										
9. Names	and Street Addres		/or Director (Florid	ta nonpro	ofit corporations must list at le		-5	ee attac	hed fo	X
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			<u> </u>	City / St	tate / Zip	
CEO.	Andrew W. Miller, Jr			30 Burton Hills Suite 325 9050 Executive Park Dr			Na	shuille	TN 3	1215
Sec.	James C Housteau			suite C-110			Kne	oxville,-	TN 316	723
Dir.	Gene Burleson			320 Argonne Dr.			Atlanta, GA 30305			
Dir.	Joel S. Kanter		<u>~ (</u>	913 Douglass Dr.			McLean, VA 22161			
Dir	Alan	Guy		1900	a Herron Co	de Dr.	Kn	oxville, T	TN 37	922
Dic.	Rober	+ Henry		435	Royal Oak	25 Dr.	Na	shuile-	TN 37	1502
this rei	instatement application by the corporation application is true	cation, the reason for disse have been paid and the i	solution has been el names of Individual	ellminated als listed o	to execute this application as d, the corporate name satisfies on this form do not qualify for ne legal effect as if made unde	s the requirements an exemption cont	s of section stained in	n 607.0401 or 617.	.0401, F.S., that The information	t all fees
SIGNA		ATURE AND TYPED OR PRI	INTED NAME OF SE	GNING OF	FICER OR DIRECTOR		Pate		aytime Phone # ·	74 03

Board of Directors Med Images, Inc.

Full Legal Name: Andrew W. Miller

Residence Address: 30 Burton Hills, Suite 325 Chairman/President/CEO

Nashville, TN 37215

Business Address:

Full Legal Name: Joel S. Kanter

Residence Address: 913 Douglass Drive

McLean, VA 22101

Business Address: 8000 Towers Crescent Drive, Suite 1070

Vienna, VA 22182

Full Legal Name: Gene Burleson

Director

Residence Address: 320 Argonne Drive

Atlanta, GA 30305-2814

Business Address:

Full Legal Name: Alan Guy

Director

Residence Address: 1909 Herron Cove Drive

Knoxville, TN 37922

Business Address:

Full Legal Name: Robert Henry

Director

Residence Address: 435 Royal Oaks Drive

Nashville, TN 37205

Business Address: 30 Burton Hills, Suite 450

Nashville, TN 37215

Full Legal Name: Jay Vines

Director

5424 Carrington Circle

Residence Address: Birmingham, AL 35173

Business Address:

Full Legal Name:

Secretary/Treasurer of the Board James C. Housteau

Residence Address:

1304 Halifax Road

Business Address:

9050 Executive Pk. Dr., Ste. C-110 Knoxville, TN 37922

Knoxville, TN 37923-4614