K12268

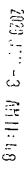
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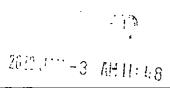
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: South Florida Me	dical Imaging, P.A.	
DOCUMENT NUM	K12269		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Joylyn Hinson		
		Name of Contact Person	1
	South Florida Medical Ima	ging	
		Firm/ Company	
	2929 E Commercial Blvd,	Suite 600	
		Address	
	Fort Lauderdale, Florida 3	3308	
		City/ State and Zip Cod	ę
:h:			
jnins ——	on@sfmicvi.com	1.5	
	h-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Joylyn Hinson		954 at (636-2290
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee
Tall	ahassee FL 32314	2415 N	J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



South Florida Medical Imaging, P.A.

-	as currently filed with the Florida Dept. of State)
K12268	
(Documen	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
NA	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRI	ESS)
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
NΔ	ice audress;
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registo	arad Agent
	m familiar with and accept the obligations of the position.
Sienzetze	re of New Registered Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SD	Howard Rubinson,M.D.	2929 E Commercial
Add			Suite 600
X Remove			Fort Lauderdale, FL 33308
2) Change	SD	Amisha Agarwal, M.D.	2929 E Commercial
X Add			Suite 600
Remove 3) Change		_	Fort Lauderdale, FL 33308
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	(Attach	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	: Ifana	mondment provides for an explanation of the state of the
(if not applicable, indicate N/A)	nrovi	sions for implementing the amendment if not contained in the amendment itself:
NA	(,	f not applicable, indicate N/A)
	NA	
	·	

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The date of each amendment	s) adoption:, if other	than the
date this document was signed.	January 2, 2020	
Effective date if applicable:	January 3, 2020	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will not be liste to Department of State's records.	d as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) is/are be	ng filed pursuant to s. 607.0120 (11) (e), F.S.	
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder	
Dated	12/2020 M/Kul	
C : A	MA Strale.	
Signature (By	a director, president or other officer – if directors or officers have not been	
sel	ected, by an incorporator – if in the hands of a receiver, trustee, or other court	
арр	pointed fiduciary by that fiduciary)	
	Michael J. Rush (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President / Director	
	(Title of person signing)	

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