2003 LIMITED LIABILITY COMPANY

| UN | NIFORM BUSINE | SS REPORT | r (U | BR) | _ | | , | | |
|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------------------|---------------------------|
| DOCUMENT # L02000014104 1. Entity Name DACING INVESTMENT CROUP 1.1.C. | | | | | | AMERICA DESCRIPTION OF THE PROPERTY OF THE PRO | | | |
| IMAGING INVESTMENT GROUP, L.L.C. | | | | | 0 | 13 MAY - 1 P | M 12: 20 | | |
| Principal Plac | | Mailing Address | | | - | ECRETARY C | F STATE | å | |
| 777 37TH STREET. #D-106 VERO BEACH FL 32960 | | 777 37TH STREET. #D-106 VERO BEACH FL 32980 | | | AT A | LLAHASSEL | ' FFAKID | A | |
| O District D | Name of Division | 3. Mailing Address | | | | | | | |
| · | Place of Business | | | | | 514 B14 68 10 10 10 11 12 | | 01001 HUN 38 1 | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | CHECK HER | E IF MAKING | CHANGES | |
| City & Stat | e | City & State | | | 4. FEI Num | nber - 04988 | 57 | | plied For t Applicable |
| Zip Country | | Zip Count | | try | | ite of Status Desired | | 55:00 Add | |
| | 6. Name and Address of Current | Registered Agent | | | 7. Name a | nd Address of New | Registered A | gent | |
| TAYLOR, J.ATWOOD III | | | | | efer | | e | | |
| | i n. Highway a-1-a- T-20 0 | Street Addre | | | | ber is Not Acceptab | .e) | | |
| VER | 9-BEACH-FL-32963 | | 777 <u>3</u> | | Street_ | ン+e FL | D - /o | | |
| | | A | | Vero | Beach | | | 329 | 60 |
| | named entity submits this statement for ions of registered agent. | r the purpose of changing its i | registere | d office or registere | ed agent, or b | ooth, in the State of F | iorida. I am fa | miliar with, a | and accept |
| _ | iono or regionareo agoria | | | | 4/29 | 103 | | ļ | |
| SIGNATURE . | Signature, typed or printed name of registered agent a | Agent signature required | when reinstating) | | DATE | | | | |
| | | · · · | | EE IS \$50.00 | | | | | ĺ |
| | | Make Check Payable | | - | nt of State | | | | |
| · | | | | y 1, 2003 | - | | | | |
| 9. | MANAGING MEMBE | · | 10. | | | **** | CHANGES | Change | Addition |
| TITLE NAME | JOYCE, PETER H MD | L_] Delete | TITLE | i | 2 | 000178 170301053 | <i>1</i> 2681 | Change | |
| STREET ADDRESS | 777 37TH STREET, #D-106 | • | | ET ADDRESS | 05/0 | 1/0301053 | ~-015 * | ₩50 . 00 | ļ |
| CITY-ST-ZIP | VERO BEACH FL 32960 | | CITY- | ST-ZIP | | | | | |
| TITLE | MGRM | ☐ Delete | TITLE | | | | | ☐ Change | Addition |
| NAME STREET ADDRESS | BISSET, ROBERT R MD 777 37TH STREET, #D-106 | | NAME | ET ADDRESS | | | | | |
| CITY-ST-ZIP | VERO BEACH FL 32960 | - | | ST-ZIP | _ | | | | |
| TITLE | MGRM | ☐ Delete | TITLE | | | | | Change | Addition |
| NAME | COLELLA, JAY P MD | | NAME | 1 | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 777 37TH STREET, #D-106 | | | ET ADDRESS ST-ZIP | | | | | 1 |
| TITLE | VERO BEACH FL 32960 MGRM | Delete | TITLE | | | - | | ☐ Change | Addition |
| NAME | NAGEL, HEATHER S MD | | NAME | | | | | | |
| STREET ADDRESS | 777 37TH STREET, #D-106 | | | ET ADDRESS | | | | | |
| CITY-ST-ZIP | VERO BEACH FL 32960 MGRM | | | ST-ZIP | | | | Chases | □ Addison |
| TITLE NAME | PUSKAR, GEORGER T MD | Delete | TITLE | i | | | | ☐ Change | ☐ Addition |
| STREET ADDRESS | 777 37TH STREET, #D-106 | | STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | VERO BEACH FL 32960 | | CITY- | ST-ZIP | <u>.</u> | | · | | |
| TITLE | | ☐ Delete | TITLE | | | | ; | Change | Addition |
| NAME STREET ADDRESS | | | NAME | T ADDRESS | | | | |] |
| CITY-ST-ZIP | | | | ST-ZIP | | | | | 1 |
| 11. I hereby of indicated limited liab | pertify that the information supplied with on this report is true and accurate and billty company or the receiver or trustee | this filing does not qualify for that my signal re shall have the empowered to execute this re | the exer ne same eport as | nption stated in Sec legal effect as if ma required by Chapte | ction 119.07(3 ade under oa er 608, Florida | B)(i), Florida Statutes th; that I am a mana a Statutes. | I further certifiging member | y that the int or manager | formation of the |
| CICALAT | ude. Signat | W/W/W/ | |) | | 4/291 | 62 | | |
| SIGNAT | SIGNATURE AND TYPED OR PRINTED NAME OF | <u> </u> | | | VTATIVE | Date Date | | time Phone # | |