

# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000052567

**FILED**  
**Jan 05, 2005**  
**Secretary of State**

**Entity Name:** ADVANCED DIAGNOSTIC IMAGING PROFESSIONAL SERVICES, P.L.L.C.

**Current Principal Place of Business:**

2650 NORTH MILITARY TRAIL  
FOUNTAIN SQUARE II, SUITE 140  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2650 NORTH MILITARY TRAIL  
FOUNTAIN SQUARE II, SUITE 140  
BOCA RATON, FL 33431

**New Mailing Address:**

7426 FLORANADA WAY  
DELRAY BEACH, FL 33446 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

FAGIEN, MICHAEL  
2650 NORTH MILITARY TRAIL  
FOUNTAIN SQUARE II, SUITE 140  
BOCA RATON, FL 33431 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL FAGIEN

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: FAGIEN, MICHAEL  
Address: 2650 NORTH MILITARY TRAIL, SUITE 140  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: FAGIEN, MICHAEL  
Address: 7456 FLORANADA WAY  
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL FAGIEN

MGR

01/05/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date