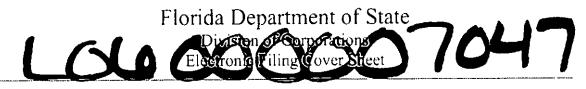
Division of Corporations



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H22000361290 3

	istration Sec ision of Corp			•	
enn regg.		edical Imaging, LLC			
SUBJECT:		Name of Limi	ted Liability Company		
The enclosed	l Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspon	idence concerning this matter	to the following:		
		Mary Kate Mahoney, Esq.			
			Name of Person		
		RezLegal, LLC			
			Firm/Company		
		816 A1A North, Suite 204			
		Address			
		Ponte Vedra Beach, FL 32082			
		spotter@radassociates.us	City/State and Zip Code		
			to be used for future annual report	notification)	
For further is	nformation co	oncerning this matter, please ca	all:		
Mary Kate 2	Mahoney, Esc	1.	904 297-0983 at ()		
	Name of	Person	Area Code Duy	time Telephone Number	
Enclosed is	a check for th	e following amount:			
■ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
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Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H22000361290 3

Florida document number 1.06000007047  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:    Name of New Registered Agent:   Lisa Adams		City	Zip Ce	ode
The Articles of Organization for this Limited Liability Company were filed on				<u></u>
The Articles of Organization for this Limited Liability Company were filed on 01/20/2006 and assigned  Florida document number 1.06000007047  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:  Name of New Registered Agent:  Lisa Adams	New Registered Office Address:		er Florida street address	<del></del>
The Articles of Organization for this Limited Liability Company were filed on L1/20/2006 and assigned Florida document number L0/6000007047  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:		1673 Mason Ave. STF 305		
The Articles of Organization for this Limited Liability Company were filed on O1/20/2006 and assigned  Florida document number 1.06000007047  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered	Name of New Registered Agent:	Lisa Adams		
The Articles of Organization for this Limited Liability Company were filed on O1/20/2006 and assigned  Florida document number 1.06000007047  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)				
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		monthly company were men w		6
(A Florida Limited Liability Company)	The Articles of Organization for this Limited L	iability Company were filed o	n 01/20/2006 and	assigned
(Apple of the Limited Claimity Company by a triow appears on our records.)	\ <u></u>	(A Florida Limited Liability Comp	any)	
Inverness Medical Imaging, ELC		ted Liability Company as it now a	ppears on our records.)	_

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Oocusigned by:

Lisa Llam's

If Changhig Registered Agent, Signature of New Registered Agent

Page: 5

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H amending Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

10/21/2022 07:16 AM

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
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(If an effective date in Note: If the date	fother than the date of filing:
he record specifies ord is filed.	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Datud	October 21 2022
Dated	DocuSigned by:
-	sa Adams
	Signature of a member or authorized representative of a member
Lisa A	Adams, CEO
	Typed or printed name of signee

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