

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000043350

**FILED**  
**Oct 15, 2007**  
**Secretary of State**

**Entity Name:** SHARED P.E.T. IMAGING OF FLORIDA, LLC

**Current Principal Place of Business:**

119 VIA PARADISIO  
PALM BEACH GARDENS, FL 334186204

**New Principal Place of Business:**

3850 TAMPA ROAD  
OLDSMAR, FL 34677

**Current Mailing Address:**

119 VIA PARADISIO  
PALM BEACH GARDENS, FL 334186204

**New Mailing Address:**

4912 HIGBEE AVE., NW  
SUITE 100  
CANTON, OH 44718

**FEI Number:** 20-4766750      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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: JOYCE GILBERT

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SKILES, RANDY W  
Address: 119 VIA PARADISIO  
City-St-Zip: PALM BEACH GARDENS, FL 334186204

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: SKILES, RANDY W  
Address: 119 VIA PARADISIO  
City-St-Zip: PALM BEACH GARDENS, FL 334186204

Title: PART ( ) Change (X) Addition  
Name: OSSAKOW, STEVEN DR.  
Address: 2676 CARRINGTON ST., NW  
City-St-Zip: NORTH CANTON, OH 44720

Title: PART ( ) Change (X) Addition  
Name: ROSEDALE, RAYMOND DR.  
Address: 5005 BLAKEMORE TRAIL, NW  
City-St-Zip: CANTON, OH 44718

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RANDY W. SKILES

CEO

10/15/2007

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