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MAR 1 0 2017 S. YOUNG SECRETARY OF SIGHE TALL AHASSEE, FEORID

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Manatee Hakewal Radiology assite Name of Limited Liability Company	ates, LIC
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing	3 .
Please return all correspondence concerning this matter to the following:	
Dr. John Thomas Name of Person	
Manatee Galewood Radiology associates	
Firm/Company 8374 Market At 12-502 Address	•
Poraderton, FL 34202 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Cathy Grunei Sen at (941) 955.4401 Name of Person Area Code & Daytime Tele	phone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\textstyle \\$55 Filing Fee & Certified Cop	у

INHS18 (2/14)

MANATEE LAKEWOOD RADIOLOGY ASSOCIATES

8374 MARKET STREET, # 502, BRADENTON, FL 34202 941.955.4101 941.346.6278 Fax Line

John Thomas, MD Jeffrey Wasserman, DO

Feb 20, 2017

Florida Department of State Division of Corporation

Re: Articles of Organization Change

Articles of Organization for Manatee Lakewood Radiology Associates, LLC.

The undersigned person, acting as the organizer of Manatee Lakewood Radiology Associates, LLC under the Florida Limited Liability Company Act adopts the following articles of Organization Change.

The Company's initial registered Agent has changed from Dr. Jeffrey Wasserman to Dr. John Thomas to as of February 20, 2017

The name and address of the person initiating this change:

Dr. John Thomas

Manatee Lakewood Radiology Associates, LLC

8374 Market Street, Box 502

Bradenton, FL 34202

Yohn L Thomas, MD

Jaffrey Wasserman, DO

asianclyer 2000 ayahoo.com

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ARTICLES OF AMENDMENT TO THE ARTICLES OF ORGANIZATION OF

MANATEE LAKEWOOD RADIOLOGY ASSOCIATES, LLC.

- 1. The Articles of Organization of MANATEE LAKEWOOD RADIOLOGY ASSOCIATES, LLC, a Florida limited liability company, were filed with the Florida Department of State on September 8, 2006 with a document number of L06000088719.
- 2. The name of the new Registered Agent and/or registered office address as follows:

John Thomas, MD, Member 8374 Market Street, Box 502 Bradenton, FL 34202

3. The current name and address of the sole manager and member of the organization is to be as follows:

John Thomas, MD, Member 8374 Market Street, Box 502 Bradenton, FL 34202

4. In all other respects, the Articles of Organization of the limited liability company are ratified and affirmed in all respects.

Dated: 1-ep 21, 2012

John Thomas, MD, Member

ACCEPTANCE OF 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 agent office address, I hereby confirm that the limited liability company has b n notified in writing of this change.

Dated: Feb 21, 201

John Thomas, MD, Registered Agent

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1 10/140	a.			\cap	_	
1. Na	ume of the limited liability company: Manatee	Lake	wood	Kadiology	a Ssc	<u>ciates,</u>
2. (a)	8374 Market St \$ 502	(b)		374 Mar C	et St	12502
(' '	Principal office address of limited liability company:	_ (-)-	Ma	ailing address of limited	liability con	npany:
	(Note: MUST BE STREET ADDRESS)			(<u>Note: MAY BE POST</u>		
	Pradenton, FL 34202	- -		braden tow), FC 3	4202
	Feb 20,2017					
3.	Date of filing/registration in Florida	4.	Γ	Document number		
5. (a)	John Thomas, MD					
	Registered Agent and Registered Office shown on the records of the	e Florida D	ept. of State:			
					-	100
	Registered Office Address (MUST BE FLORIDA STREET AL				3	
	8374 Market St # 502				MAR	天园
	B374 Market St # 502 Braden tow, FL	2 12			6	
	Draden TOW, ,FL	542	52		P	mer
(1.1	Same				AM 11: 42	5
(b)	Enter name of NEW Registered Agent and/or NEW Registered O	ffice addre	·es:		<u>.</u>	
		THE HUMI	.33.		10,	N. A.
	Same					
	NEW Registered Office Address:					
						
	, FL_					
If the li	mited liability company is not organized under the laws	of the St	ate of Flori	ida, it is hereby con	firmed tha	t after
the char	nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab	he registe:	red office a	and the business off	ice of the	registered
was/we	ere authorized by an affirmative vote of the members of	the limite	d liability	company or as other	rwise prov	ided in
the artic	cles of organization or the operating agreement of the li	mited lial	oility comp	any.		
X			John	Printed or typed name of	nD	
	and amender or authorized representative of a member				_	
i neret provisio	by accept the appointment as registered agent and agrec ons of all statutes relative to the proper and complete p	e to act in erforman	this capac ce of my du	ity. I further agree ities, and I am famil	to comply liar with a	with the
the obli to mere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he	fór in Cha reby cont	aptěr 605, l Irm that th	F.S. Or, if this doci e limited liability co	iment is be Impany ho	eing filed Is been
notifiea	I'in writing of this change.	>19				
Signatur	collegistered Agent					
Signatur	SAN DERING ARCHI					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00