L11000121773

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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

10-27-2011

NAME:

SIMONMED FLORIDA LLC

TYPE OF FILING: ARTICLES OF AMENDMENT

COST:

\$60

RETURN: CERTIFICATE OF STATUS & CERTIFIED COPY

ACCOUNT: FCA00000015

AUTHORIZATION:

COVER LETTER

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то:	Registration Se Division of Con			•	ACL STEP OF THE OR ST
SUBJECT: SIMONMED F			ED FLORIDA LLC		(2) (2) (2)
		Name of Lim	ited Liability Company		A CONTRACTOR
The end	closed Articles of	Amendment and fee(s) are su	bmitted for filing.		% °
Please	return all correspo	indence concerning this matter	r to the following:		
			Name of Person		1
		, p. wee	Firm/Company		:
			Address		
			City/State and Zip Code		
		E-mail address: (flynn@simonmed.com to be used for future annual report notifica	tion)	
For furt	her information co	oncerning this matter, please o	•	,	1
			at ()		
	Name of	Person	Area Code & Daytime	Felephone Number	
Enclose	d is a check for th	e following amount:			
\$25.	00 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)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

AMENDED AND RESTATED ARTICLES OF ORGANIZATION

OF

SIMONMED FLORIDA LLC

(Filedlin accordance with s. 608.411, F.S.)

SIMONMED FLORIDA LLC, Florida document number L11000121773, filed its original Articles on October 25, 2011, and hereby adopts the following Amended and Restated Articles of Organization:

ARTICLE 1 - NAME

The name of the limited liability company is SIMONMED IMAGING FLORIDA LLC.

ARTICLE 2 - ADDRESS

The mailing address and street address of the principal office of the limited liability company is:

Principal Office

7304 E. Deer Valley Road - Suite 105

Address:

Scottsdale, Arizona 85255

Mailing Address:

7304 E. Deer Valley Road - Suite 105

Scottsdale Arizona 85255

ARTICLE 3 - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Capitol Corporate Services, Inc. 155 Office Plaza Drive - Suite A Tallahassee, Florida 32301 Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated in this certificate, 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 relating to the property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provide for in Chapter 608, F.S.

CAPITOL CORPORATE SERVICES, INC.

By: Pegg all assist secy.

ARTICLE 4 - MANAGER(S) OR MANAGING MEMBER(S)

The name and address of each manager or managing member is as follows:

SimonMed Imaging Incorporated, an Arizona corporation 7304 E. Deer Valley Road - Suite 105 Scottsdale, Arizona 85255 Managing Member

Dated: October 25, 2011.

SIMONMED IMAGING INCORPORATED, an Arizona corporation, its Managing Member

Tim/Flyng-Chief Financial Officer