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(((H24000323508 3)))



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Docusign Envelope ID: 1EDC892D-8D04-47B3-8816-25B84D20B559 ARTICLES OF AMENDMENT (((H240003235083))) TO

ARTICLES OF ORGANIZATION OF

DEX IMAGING OF NORTH CAI							
(Name of the Limi	A Florida Limited	uny as it now appears on our records.) Liability Company)	<u></u>				
The Articles of Organization for this Limited Liability Company were filed on 04/07/2015 and ass Florida document number L15000060614							
This amendment is submitted to amend the foll	lowing:						
A. If amending name, enter the new name of	f the limited liab	illty company here:					
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."				
Enter new principal offices address, if applic		5109 W Lemon Street					
(Principal office address MUST BE A STREE		Tampa, Florida 33609					
Enter new malling address, if applicable:		5109 W Lemon Street					
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	Tampa, Florida 33609	,				
B. If amending the registered agent and/or r agent and/or the new-registered office addres	egistered office a <u>ss here</u> :	iddress on our records, <u>enter the name</u> :	of the new registered				
Name of New Registered Agent:	Thomas C. Nasi	h II	23				
New Registered Office Address:	625 Court Stree		PH D				
	Clearwater	Enter Florido sireel address Florida ³³⁷⁵	3: 42 STAT				

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.

· Fignes by: Thomas C. Nash, 11

City

If Changing Registored Agent, Signuture of New Registered Agent

Zip Code

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MGR = Manager

AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Daniel Doyle Jr.	5109 W Lemon Street	🗄 Add
		Tampa, Florida 33609	□Remove
			□Change
MGR	Jeffrey L. Hall	500 Stapics Drive	🗆 Add
		Framingham, MA 01702	Remove
			Change
	. <u></u>		🗆 Add
			🛛 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _______ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3Xb) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records,

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated S	eptember 23	2024			
	Signed by:				
	Daniel M. Doyle	jer,			
	240CT2310C08491;	Signature of a member or authorized representative of a member			
	Daniel Doyle, Jr.				
	Typed or printed name of signee				