

L22 000 101155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

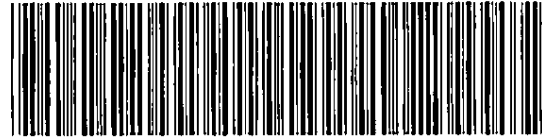
(Document Number)

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2022 JUL 21 AM 8:12

ALLAHASSEE, FL 32006

SECRETARY OF STATE  
TALLAHASSEE, FL 32399



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 20, 2022

COGENCY GLOBAL

SUBJECT: STATE MEDICAL IMAGING LLC  
Ref. Number: L22000101155

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2022 JUL 21 PM 4:19

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We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne  
Regulatory Specialist II

Letter Number: 022A00013777



Account#: 120000000088

**ISSUES? CALL**  
**David:**  
**850-270-0082**

Signature: *David Shulman*



**COGENCYGLOBAL**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
**866.625.0838**  
COGENCYGLOBAL.COM

Date: **July 21, 2022**

Account#: I20000000088

Name: **David Shulman**

Reference #: **1712518**

Entity Name: **STATE MEDICAL IMAGING LLC**

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other **Statement of Correction**

**ISSUES? CALL**

**David:**

**850-270-0082**

Authorized Amount: **\$25.00**

Signature: *David Shulman*

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: State Medical Imaging LLC

**SECOND:** The Florida Document number of the limited liability company is: L22000101155

**THIRD:** Document to be corrected is: LLC NAME CHANGE

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

State Medical Imaging LLC is incorrect, the correct name is Stat Medical Imaging LLC

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

**OR**

- ☐ The electronic transmission of the record was defective.

/s/Jeffrey Bernfield, Tinker Investments LLC, Manager 6/20/2022

Signature of Authorized Representative

Date

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**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.*

\_\_\_\_\_  
Registered Agent's Signature

Filing Fee:                      \$25.00  
Certified Copy:                \$30.00 (optional)

2022 JUL 21 AM 8:12  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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\_\_\_\_\_  
\_\_\_\_\_

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