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ALAN H. RUMPH Of Counsel

PERSONAL & CONFIDENTIAL

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

Re: Destin Open MRI, LLC

\*\*\*\*125.00

Dear Ladies and Gentlemen:

Enclosed is an application for the above limited liability company to do business in Florida. We have also enclosed the consent of the registered agent. Enclosed is a check in the amount of \$125.00 for the filing fees.

Please return to me a letter of acknowledgment.

Very truly yours,

G. Boone Smith, III

GBS/mh Enclosures FILED

02 NUG 12 MM 4: 52

SECRETARIASSEE FLORIDA

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

_ (Nan	ne of foreign limited liability company)
GEORGIA	3.
Jurisdiction under the law of which foreign limi company is organized)	ted liability (FEI number, if applicable)
FEBRUARY 19, 2002	5. PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
AUGUST, 2002	
(Date first transacted business in	Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
235 PELICAN PLACE	
DESTIN, FL 32541	
	Street address of principal office)
701 % 11% 17% · · · · · · · · · · · · · · · · · · ·	
If limited liability company is a manage	er-managed company, check here
The name and usual business addresses	of the managing members or managers are as follows:
PETER O. HOLLIDAY, M.D.	<b>3 9 9 9</b>
420 CHARTER BLVD	SE 2
MACON, GA 31210	<u> </u>
	D <sub>A</sub>
Attached is an original certificate of existence no	o more than 90 days old, duly authenticated by the official having custody of reco
	nized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
translation of the certificate under oath of the tran	nslator must be submitted.)
. Nature of business or purposes to be c	conducted or promoted in Florida: OWNERSHIP AND
OPERATION OF MRI SCANNING	DEVICES
OPERATION OF MRI SCANNING	DEVICES
	ber or an authorized representative of a member.

G. BOONE SMITH, III, ATTORNEY FOR PETER O. HOLLIDAY

Typed or printed name of signee

an affirmation under the penalties of perjury that the facts stated herein are true.)

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Company is:	
DESTIN OP	EN MRI, LLC	
2. The name an	nd the Florida street address of the registered agent and office are:	
	MC CARRY VENNEDY	
	MS. CATHY KENNEDY (Name)	
	235 PELICAN PLACE UNIT #9	
	Florida street address (P.O. Box NOT ACCEPTABLE)	
	DESTIN, FL 32541	
	(City/State/Zip)	

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 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 608, F.S.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0209709
DATE INC/AUTH/FILED: 02/19/2002
JURISDICTION : GEORGIA
PRINT DATE : 07/29/2002

FORM NUMBER : 211

SMITH, HAWKINS, HOLLINGSWORTH & REEVES, LLP MICHELLE HILL
P. O. BOX 6495
MACON, GA 31208-6495

## CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

DESTIN OPEN MRI, LLC GEORGIA LIMITED LIABILITY COMPAN

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of Cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20020729130613014



Cathy Cox Secretary of State