

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M07000007512

FILED
Oct 27, 2008
Secretary of State

Entity Name: SURGICAL IMAGING RESOURCES, LLC

Current Principal Place of Business:

1650 ELM HILL PIKE, BUILDING 5
NASHVILLE, TN 37210

New Principal Place of Business:

Current Mailing Address:

1650 ELM HILL PIKE, BUILDING 5
NASHVILLE, TN 37210

New Mailing Address:

FEI Number: 33-1102591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JENNIFER AULTMAN

10/27/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GEORGE, CHANCE
Address: 17 N MONTERAY STREET
City-St-Zip: MOBILE, AL 36604

Title: MGRM () Delete
Name: BROGAN, BRENDAN
Address: 34 STONEHURST GREEN
City-St-Zip: BIRMINGHAM, AL 35213

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WALLACE, LOUIS C
Address: 200 RIVER HILLS DRIVE
City-St-Zip: NASHVILLE, TN 37210

Title: MGRM (X) Change () Addition
Name: HANSEN, MARK
Address: 1089 DELELSSELINE BLVD.
City-St-Zip: MT PLEASANT, SC 29464

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BLAKE GREGG

CFO

10/27/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date