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DIVISION OF CERFORATIONS

MAY -7 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JHL IMAGING SERVICES, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificat Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida,	le of rida
Please return all correspondence concerning this matter to the following:	
DAVID LAWSON	
Name of Person	
JHL IMAGING SERVICES, LLC	
Firm/Company	
P.O. BOX 941551	
Address	
MIAMI, FL 33194	
City/State and Zip Code	
DAVID@JHLIMAGINGSERVICES.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
DAVID LAWSON at (678) 243-0581	
Name of Person Area Code & Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\int_{\text{status}} \\$125.00 \text{ Filing Fee & Certificate of Status} \] \$\int_{\text{Certificate of Status}} \\$155.00 \text{ Filing Fee & Certified Copy} \] \$\int_{\text{of Status & Certified Copy}} \]	

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 RUSINESS IN THE STATE OF FLORIDA

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 JHL IMAGING SERVICES, LLC		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC	;.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a concent of the managers or managing members adopting the alternate name. The alternate name must include "Limite Company," "L.L.C," "LLC.")		
2. GEORGIA (Jurisdiction under the law of which foreign limited liability company is organized) 3. 36-4721269 (FEI number, if applicable)		
4. JANUARY 12, 2012 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cexist or "perpetual")	ease to	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	12	SE DIVIG
7. 1836 BALLYBUNION DR.	MAY -	BE TE
JOHNS CREEK GA 30097	ယ	_32,
(Street Address of Principal Office)		경우
8. If limited liability company is a manager-managed company, check here 🗹	AM 10: 05	STATE STATE
9. The name and usual business addresses of the managing members or managers are as follows:	ဘ	<u> </u>
CONNIE HIGHLAND - 6115 ROUTE 31, RINGWOOD ILL 60072		
JERRY HUDSPETH - 1836 BALLYBUNION DR JOHNS CREEK GA 3	0097	_ 7
DAVID LAWSON - 10392 W STATE ROAD 84 STE 107 DAVIE FL 333	24	
10. Attached is an original certificate of existence, no more than 90 days old, duty authenticated by the official having custo the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under oath of the translator must be submitted.)		ecords in
11. Nature of business or purposes to be conducted or promoted in Florida:		
Mobile X-Ray Services		- -
Signature of a member or an authorized representative of a member.		
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the		
penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, I		
DAVID LAWSON	.u.j	

Typed or printed name of signee

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 C	company is:
JHL IMAGING SERVICES	, LLC
If unavailable, the alternate to be used i	n the state of Florida is:
2. The name and the Florida street add	ress of the registered agent and office are:
DAVID LAWSON	
	(Name)
10392 W STATE I	ROAD 84 STE 107
Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)
DAVIE	_{FL} 33324
	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, Florida Statutes.

\$ 100.00

Filing Fee for Application

\$ 25.00

Designation of Registered Agent

\$ 30.00

Certified Copy (optional)

\$ 5.00

Certificate of Status (optional)

HO SOM MAY -3 AM IO: OA

Control No. 12003464

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Drive Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

JHL IMAGING SERVICES, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 01/12/2012 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 5th day of April, 2012

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 8901884-2 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp