## P03000065465

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Pa Change

MAY 27 2010

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## **COVER LETTER**

TO:	Amendmen Division of	t Section Corporations						
SUBJ	ECT:	MEDIMAGII Name of (	NG, INC.					
		Truine of	o i porumon					
DOC	UMENT NUI	MBER:	000065465					
The e	The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.							
Please	return all cor	respondence concerning this matte	er to the following:					
		Mike L	uetgert					
	_	Name of Co	ontact Person					
			& Associates, Inc.					
		Firm/C	ompany					
	,		Swann Ave. dress					
		Au	11.022					
		Tomas	EL 22606					
		City/State a	FL 33606 and Zip Code					
			noecker.com future annual report notification)					
		D-man address. (to be asea for	rature aimuar report nonneation;					
For fi	urther informa	tion concerning this matter, please	call					
rorre	uuici mioima	non concerning uns maner, prease	can.					
		llard A. Blair, Esq.	at ( 813 ) 229-7600  Area Code & Daytime Telephone Number					
	Nam	ne of Contact Person	Area Code & Daytime Telephone Number					
Enclo	sed is a \$35.0	0 check made payable to the Depar	rtment of State.					
	,	Mailing Address: Amendment Section	Street Address: Amendment Section					
		Division of Corporations	Amenament Section Division of Corporations					
		P.O. Box 6327	Clifton Building					
		Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301					

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617 unge is submitted for a corporation of	organized	under the laws of the Stat	e of Flori	da		
	er to change its registered office or r	_		e of Florid	а.		
	the corporation: MEDIMAGING			22606			
2. The principal	office address: (NEW) 1409 We	esi Swai	iii Ave., railipa, FL	33000	<del>-</del>		
3. The mailing a	address (if different): (NEW - sam	ne as Pr	incipal)				
=	est Swann Ave., Tampa, FL						
4. Date of incor	poration/qualification: 06/12/2	2003	Document number:	P030	0006	5465	
	d street address of the current registe rtment of State: (If resigned, enter re		and registered office on f	ile with the	:		
	Hawk Island Leasing II, LLC	<u> </u>	····				
	3501 Cattlemen Road Suite	e C					
	Sarasota, FL 34232 US			· į	2010	5	
6. The name and (if changed):	d street address of the new registered	d agent (if	changed) and /or register	ed office	RETARY	10 HAY 27	770
	Willard A. Blair, Esq.				m en	PM	
	101 E. Kennedy Blvd., Suite				ALS.	1:56	
	P.O. B Tampa, FL33602	ox NOT acce	eptable			ית	
T1 11						1 .	
_	ess of its registered office and the s l be identical.					agent	3
Such change w authorized by t	as authorized by resolution duly ad he board, or the corporation has be	dopted by een notifie	its board of directors or d in writing of the chang	by an office.	cer so		
Signah	Herrian Shiffer of Angector Bany	que	Mike Luetgert		ent		
I hereby accept I further agree of my duties, an document is be	t the appointment as registered age to comply with the provisions of a nd I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	ll statutes he obligati e in the re	ree to act in this capacit relative to the proper an ion of my position as reg gistered office address, I	ly. id complet istered ago hereby co	e perfo ent. O onfirm i	rmand r, if the that th	e is e
			5/20	/10			
8	gnature of Registered Agent		Date				
If signing on bo	ehalf of an entity:						
	Typed or Printed Name						

\* \* \* FILING FEE: \$35.00 \* \* \*