

**P0500038945**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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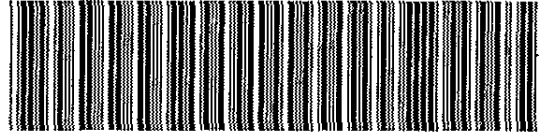
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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change  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Radiological Physics of South Florida, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P050 00028945

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN FRANQUIZ

(Name of Contact Person)

Radiological Physics of South Florida  
(Firm/Company)

8701 SW 212 Ter  
(Address)

Miami FL 33189  
(City/State and Zip Code)

For further information concerning this matter, please call:

JUAN FRANQUIZ  
(Name of Contact Person)

at ( 305 ) 308 5210  
(Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Radiological PHYSICS OF SOUTH Florida, INC.
2. The principal office address: 8701 SW 212 TER MIAMI, FL 33189
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: MAY 1 2005 Document number: P05000028945
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  
JUAN FRANQUIZ  
4608 NW 114 AVE APT. 1103  
MIAMI, FL 33178

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

JUAN FRANQUIZ  
8701 SW 212 TER  
(P.O. Box NOT acceptable)  
MIAMI, FL 33189

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

J. Frangy  
(Signature of an officer or director)

JUAN FRANQUIZ, DIRECTOR  
(Printed or typed name and title)

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

J. Frangy  
(Signature of Registered Agent)

08-20-06  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)