# 205000115351

(Re	questor's Name)
(Ad	dress)
(Address)	
(Cit	y/State/Zip/Phone #)
PICK-UP	
(Bu	siness Entity Name)
(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
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08/18/05--01027--022 \*\*87.50



J. Shivers AUG 1.9 2005

# TRANSMİTTAL LETTER

Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

### SUBJECT: South Florida Diagnostics and Imaging Center, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee

\$78.75 Filing Fee & Certificate of Status **\$78,75** Filing Fee & Certified Copy

**2** \$87.50 Filing Fee, Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

FILED 05 AUG 18 AM 8: 19 SI CRETARY OF STATE

FROM: David Lienhardt

Name (Printed or typed) 1050 SE Monterey Road, Suite 400 Address Stuart, Florida 34994

City, State & Zip

772-288-2400 x1310

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

# **ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

. . . . . . .

The name of the corporation shall be: South Florida Diagnostics and Imaging Center, Inc.

#### **ARTICLE II PRINCIPAL OFFICE**

1050 SE Monterey Road, Suite 400, Stuart, Florida 34994

#### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: providing diagnostic imaging services.

AUG 18 AM 8:

#### ARTICLE IV SHARES

The number of authorized shares of stock is: 1,000 shares.

#### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

William E. Anspach, III, MD, President/Director William E. Carlson, MD, V. President/Director Scott M. Desman, MD, Secretary/Director George J. Haas, MD, Director James D. Hoffman, MD, Director

## **ARTICLE VI REGISTERED AGENT**

David Lienhardt, 1050 SE Monterey Road, Suite 400, Stuart, Florida 34994

## **ARTICLE VII INCORPORATOR**

David Lienhardt, 1050 SE Monterey Road, Suite 400, Stuart, Florida 34994

\*

8-17-20 Date

Date

3.17.200

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent Signature/Incorporator