

P09000089046

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H11000023106 3)))



H110000231063ABCO

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
LG DIAGNOSTIC CENTER INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED  
11 JAN 27 AM 8:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 JAN 27 PM 2:47

FILED

RA Change

Electronic Filing Menu

Corporate Filing Menu

Help

01/28/11 DC

H11000023100

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

Pursuant to the provisions of sections 607.0302, 617.0302, 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: LG DIAGNOSTIC CENTER INC.
2. The principal office address: 4155 SW 130 AVE, STE 211  
MIAMI FL 33175
3. The mailing address (if different): 4155 SW 130 AVE, STE 211  
MIAMI FL 33175
4. Date of incorporation/qualification: 10-28-2009 Document number: P09000089046
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

LAZARO MOREIRA3545 SW 129 AVEMIAMI, FL 33175

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

FRANCESCO CABRERA4155 SW 130 AVE, STE 211

(P.O. Box NOT acceptable)

MIAMI, FL 33175

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.

[Signature]  
(Signature of an officer or director)

FRANCESCO CABRERA, PRESIDENT

(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.

[Signature]  
(Signature of Registered Agent)

01-01-2011

(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)

H11000023106