PLOODOJAHDZI

| (Requestor's Name) |
|---|
| • |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Filone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| (Boodinent Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
| j ' |
| |
| |
| |
| |
| |
| |
| |

Office Use Only



200181248082

05/28/10--01022--028 **52.50

10 MAY 28 PM 3: 02 SECRETARY OF STATE

Che to solve of the solve of th

COVER LETTER

| TO: Amendment Section Division of Corporations | · . | |
|---|--|--|
| SUBJECT: PINELLAS | RADIOLOGY, Inc. | |
| DOCUMENT NUMBER: PIOOOO 44221 | | |
| The enclosed Articles of Correction and fer | e are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | | |
| SHAQUIB ZAID Name of Contact Person | <u> </u> | |
| Firm/Company | | |
| Po BoX 9647 Address | | |
| Treasure Island, FL City/State and Zip Code | | |
| 5 Zaidi 22 @ qma | oort notification) | |
| For further information concerning this matter, please call: | | |
| SHAQUIB ZAIDI Name of Contact Person | at (727) 748-6154 · Area Code & Daytime Telephone Number · | |
| 3 | | |
| Enclosed is a check for the following amou | nt: | |
| \$35.00 Filing Fee | \$43.75 Filing Fee & Certificate of Status | |
| \$43.75 Filing Fee & Certified Copy | \$52.50 Filing Fee, Certificate of Status & Certified Copy | |
| 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 | |

ARTICLES OF CORRECTION

for

| PINE LLAS RADIO LOGY Inc Name of Corporation as currently filed with the Florida Dept. of State | |
|--|--------------|
| Name of Corporation as currently filed with the Florida Dept. of State | |
| Plooooo44221 Document Number (if known) | |
| Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected. | |
| These articles of correction correct Copocate Name (Document Type Being Corrected) | |
| filed with the Department of State on $\frac{5 \frac{34}{300}}{\frac{(\text{File Date of Pocument})}}$. | |
| Specify the inaccuracy, incorrect statement, or defect: | |
| Incorrect name of corporation. | _ |
| AFR A | - <u>- 1</u> |
| <u> </u> | - <u>E</u> |
| | - 0 |
| O2 NDA | _ |
| | |
| Correct the inaccuracy, incorrect statement, or defect: | |
| SHAQ ZAIDI, Inc | - |
| | - |
| | - |
| | - |
| | _ |
| | |
| | |
| (Signature of a director, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiductary, b) that fiduciary.) | |
| SHADUR ZAIDI President | |
| (Typed or printed name of person signing) (Title of person signing) | - |

Filing Fee: \$35.00