## P11000029845

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

900197643169

03/14/11--01026--006 \*\*78.75

II MAR 24 PH I2: 57
SECRETARY OF STATE

Office Use Only

MD 2/28

W11-15305

## **COVER LETTER**

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	PROPOSED CORPORAT	· · · · · · · · · · · · · · · · · · ·		<del></del>
	iginal and one (1) copy of the artic \$78.75 Filing Fee & Certificate of Status	□\$78 75	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: _	STAVEN SUN Name 6861 BRIA	ddress CI		
	PBh M B F5-7 City, S  (561) 653- Daytime Te  ADVINIAGING E-mail address: (to be used	Selephone number		345
	NOTE: Please provide the or	iginal and one copy of	the articles.	



March 16, 2011

STEVEN SWARTZ 6861 BRIARLAKE CIRCLE PALM BEACH GARDEN, FL 33418

SUBJECT: ADVANCED IMAGING, INC.

Ref. Number: W11000015305

We have received your document for ADVANCED IMAGING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

## Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 411A00006493

Division of Compositions D.O. DOV 6207 Tellahassas Florida 2021.

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:	DUANCED IMP	CING THE.	
ARTICLE II PRINCIPAL OFFICE	DUANCED DOC	UMENT TMAGING, I	V
Principal street address	CIRCLE ANDENS, FLM 3841	Mailing address, if different is:	
ARTICLE III PURPOSE  The purpose for which the corporation is organized	is:	SE SAL	
ARTICLE IV SHARES	n FWT MANAGEU	SECRETARY OF ST SECRETARY OF ST SEE. FLO	n n n
The number of shares of stock is: 100		107 107 108 108 108	تميس
Name and Title: STATE SUM Address:  Address: G861 BDINNIK PALM BEHCH	Name and Title: Address:		
Name and Title: Address:	Name and Title: Address:		
Name and Title:Address:	Name and Title: Address:		
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT Name:  Address:  6 8 6 1 B 12 10 10 10 10 10 10 10 10 10 10 10 10 10	Tacceptable) of the registered agent STER STER ELAIS CINCLO		
The name and address of the Incorporator is:  Name:  Address:  Address:	LAILE EIRCHE	sv. 6	
Having been named as registered agent to accept se this certificate, I am familiar with and accept the app	rvice of process for the above state	ted corporation at the place designated in	
ins cerujicue, i uni januaus win ana accept ine upp	жинист из гедиметей идет или и —————————————————————————————————	gree to uce in inis cupacity	
Jour lever		3/7/10	
SVA SWANT Required Signature/Registr		Date	
I submit this document and affirm that the facts sta document to the Department of State constitutes a thi			
Required Signature / Inco	rpolator	5/7/0	
Startu Sunature/Inco	2		