

P15000094769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

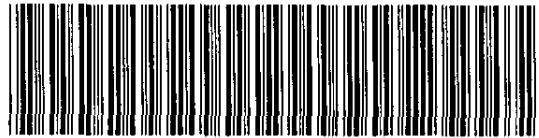
(Business Entity Name)

(Document Number)

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INT. AFF. (D-10004)

NOV 25 2015

T SCHROEDER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 885977 4321551

AUTHORIZATION :



COST LIMIT : \$ 70.00

ORDER DATE : November 24, 2015

ORDER TIME : 9:39 AM

ORDER NO. : 885977-005

CUSTOMER NO: 4321551

DOMESTIC FILING

NAME: INDEPENDENT IMAGING HOLDINGS,
INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT. 62956

EXAMINER'S INITIALS: _____

COVER LETTER

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

SUBJECT: Independent Imaging Holdings, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Michael E. Zeller

Name (Printed or typed)

100 North Tryon Street, Suite 4700

Address

Charlotte, North Carolina 28202-4003

City, State & Zip

704-331-1064

Daytime Telephone number

mikezeller@mvalaw.com

E-mail address: (to be used for future annual report notification)

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: Independent Imaging Holdings, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3347 State Road 7, Suite #100
Wellington, Florida 33449

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: holding company

ARTICLE IV SHARES

The number of shares of stock is: 100,000 shares of common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dr. J. David Ghiragossian, Pres & Dir

Address 3347 State Road 7, Suite #100
Wellington, Florida 33449

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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SECRETARY
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Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Michael E. Zeller
Address: 100 North Tryon Street, Suite 4700
Charlotte, North Carolina 28202-4003

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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
Corporation Service Company

By: _____

Required Signature/Registered Agent

Melissa Zender
Asst. Vice President

11/25/15

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

11/24/15

Date