2001 Uniform Business Report (UBR) Apr 26, 2001 8:00 am Secretary of State **DOCUMENT#** P930000 33311 1. Entity Name Paragon Imaging Consultants, Inc. 04-26-2001 90120 038 ***150.00 Principal Place of Business Mailing Address 00053163 2. Principal Place of Business 3. Mailing Address P. O. Box 30698 1900 Winston Rd. Suite, Apt: #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0410357 Not Applicable TN Knoxville Knoxville. Country Country 5. Certificate of Status Desiredi 37919 37919 USA USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY-1; 2001: Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition ☐ Delete TITLE TITLE NAME NAME See attached rider STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete Addition TITLE NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7IP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee expressivered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like exprowered.

SIGNATURE:

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/0.

(865) 243 - 5665

Daytime Phone #

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Paragon Imaging Consultants, Inc.

Directors

H. Lynn Massingale, M.D., 1900 Winston Rd., Knoxville, TN 37919

Michael Hatcher, 1900 Winston Rd., Knoxville, TN 37919

Officers

President - Neil Principe, M.D., 14050 NW 14th St., Suite 190, Ft. Lauderdale, FL 33323

Vice President - H. Lynn Massingale, M.D., 1900 Winston Rd., Knoxville, TN 37919

Vice President-Legal Affairs &

Assistant Secretary- Robert Joyner, Esq., 1900 Winston Rd., Knoxville, TN 37919

Vice President & Secretary - Michael Hatcher, 1900 Winston Rd., Knoxville, TN 37919

Vice President & Assistant Secretary - Stephen Sherlin, 1900 Winston Rd., Knoxville, TN 37919

Vice President & Treasurer - David Jones, 1900 Winston Rd., Knoxville, TN 37919

Assistant Secretary - John R. Stair, 1900 Winston Rd., Knoxville, TN 37919