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CONTACT: RAY STORMONT

PHONE: (305) 541-3694

FAX #: (305) 541-3670

NAME: ASSOCIATES IN DIAGNOSTIC IMAGING, INC.

AUDIT NUMBER.....H98000001041

DOC TYPE.....BASIC AMENDMENT

CERT. OF STATUS..0

PAGES..... 3

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*Name Change  
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Amendment  
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③

**ARTICLES OF AMENDMENT  
TO ARTICLES OF INCORPORATION OF  
ASSOCIATES IN DIAGNOSTIC IMAGING, INC.**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to Florida Statute § 607.1006, the Articles of Incorporation of Associates in Diagnostic Imaging, Inc. (hereinafter referred to as the "Corporation") are hereby amended as follows:

1. The current name of the Corporation is: Associates in Diagnostic Imaging, Inc.
2. Article 1. of the Articles of Incorporation is hereby amended to read as follows:

**Name:** The name of the Corporation is Med Access of South Florida, Inc.

3. Article 3. of the Articles of Incorporation is hereby amended to read as follows:

**Principal Office:** The address of the principal office of this Corporation is 100 S.E. 2nd Street, 36th Floor, Miami, Florida 33131.

4. In accordance with the recommendation made by the Board of Directors, the foregoing Amendments were approved and adopted by the Shareholders of the Corporation by way of a unanimous written Consent executed and dated on the 8th day of January, 1998.

Prepared by:  
Marco D. Cuono, Esquire  
Florida Bar Number: 0060798  
Wampler, Buchanan & Breen, P.A.  
900 SunTrust Building  
777 Brickell Avenue  
Miami, Florida 33131  
(305) 577-0044

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5. All Shareholders of the Corporation were entitled to vote on the aforesaid Amendments. The number of votes cast for the Amendments by the Shareholders was sufficient for approval of the Amendments.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Amendment this <sup>14th</sup> day of January, 1998.



ROBERT F. THORNE  
President

STATE OF FLORIDA           )  
                                      :  
COUNTY OF DADE         )

ss:

The foregoing instrument was acknowledged before me this <sup>14th</sup> day of January, 1998, by ROBERT F. THORNE, in his capacity as President of the Corporation, who is personally known to me, or who produced \_\_\_\_\_ as identification, and did/did not take an oath.

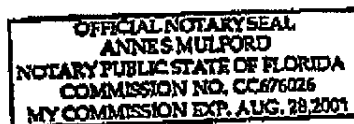
NOTARY PUBLIC:

Sign: 

Print: ANNE S. MULFORD  
State of Florida at Large

My Commission Expires:

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