

P96000064597

TRANSMITTAL LETTER

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

40010011877184
-05/26/96--01140--005
***122.50 ***122.50

SUBJECT: Inter-County Imaging, Inc
~~Florida Imaging Inc.~~
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☒ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: Mrs. KATHY McCullough
Name (printed or typed)

3500 BLUE LAKE DRIVE
Address

POMPANO BEACH, FL 33061-2022
City, State & Zip

(954) 781-3411
Daytime Telephone number

BMC
8-2-96

~~681 502~~

W96-13740
FILED
96 AUG -2 AM 8:58
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 28, 1996

KATHRYN MCCULLOUGH
3500 BLUE LAKE DRIVE
POMPANO BEACH, FL 33064

SUBJECT: FLORIDA IMAGING INC.
Ref. Number: W96000013740

We have received your document for FLORIDA IMAGING INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

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. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 096A00032159

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

FILED
96 AUG -2 AM 8:58
SEAL
TALLAHASSEE
FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

INTER - COUNTY IMAGING, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1313 SEVEN MILE TRAIL SUITE 1170
DEERFIELD BEACH, FLORIDA
33442

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

THREE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Mrs. KATHLEEN MCCULLOUGH
3500 BLUE LAKE DRIVE
POMPANO BEACH, FL 33064

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Ms KATHRYN MCCULLAGH - PAID
3500 BLUE LAKE DRIVE
PALM BEACH, FLORIDA 33404

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20 day of JUNE, 19 96.

(An additional article must be added if an effective date is requested.)

Kathryn D.C. McCullagh
Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

INTER-COUNTY IMAGING, INC.

2. The name and address of the registered agent and office is:

Mrs. KATHRYN McCullough
(NAME)

3500 BLUE LAKE DRIVE
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

POMPAHO BEACH, FLORIDA 33064
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Kathryn McCullough
(SIGNATURE)

June 20, 1986
(DATE)