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April 29, 1997

P97000033292

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399 VIA FEDERAL EXPRESS AIRBILL NO.: 5301069406

200002160922---9 -04/30/97--01116--007 *****35.00 *****35.00

RE: Le

SAMUEL J

Lee Diagnostic Imaging Center, Inc.

Statement of Change of Registered Office and Agent

Gentlemen:

Please find enclosed original Statement of Change of Registered Office and Registered Agent for the above-referenced corporation along with our check in the amount of \$35.00. Please file the document and return the receipt for same in the envelope provided for your convenience.

Should you have any questions, please do not hesitate to contact me. Thank you for your attention to this matter.

Very truly yours,

Susan C. Despres

Corporate Paralegal

scd Enclosures

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

- The name of the corporation is: Lee Diagnostic Imaging Center, Inc. 1.
- 2.

- The name and address of its present registered agent is:

 Bruce D. Green
 12800 University Drive, #600
 Ft. Myers, FL 33907

 The name and street address to which its registered agent is to be changed is: 3. Elizabeth P. Kagan 6981 Lake Devonwood Drive Ft. Myers, FL 33908
- The street address of its registered office and the street address of the business 4. office of its registered agent, as changed, are identical.
- Such change was authorized by resolution duly adopted by its board of directors 5. or by an officer of the corporation so authorized by the board of directors.

Elizabeth P. Kagan, President

Dated: 4-23-97

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES.

Elizabeth P. Kagan, Registered Agent

Dated: 4 - 23 - 97