ID Number: 102740



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

FICTITIOUS BUSINESS NAME STATEMENT

(To be Filed in Duplicate)

Pursuant to the provisions of Chapter 7-1.1-7.1 or 7-16-9 of the General Laws, 1956, as amended, the undersigned

corporation or limited liability company hereby submits the following statement for authority to transact business in the State of Rhode Island under a fictitious name: 1. The fictitious business name to be used is ______ Florida Diagnostic Imaging, Inc. 2. The legal name of the applicant corporation or limited liability company is DiagnosTie INC. 3. The state or territory under the laws of which it is incorporated or organized is ____FLORIDA The date of incorporation or organization is _____ 5. The address of the registered office within Rhode Island is____ 02903 PROVIDENCE. 6. If a corporation, the business in which it is engaged SALC & DIETRIBUTION OF MEDICAL Supplies, INCLUDING BARIUM 7. Applicant is otherwise authorized to do business in the State of Rhode Island. Under penalty of perjury, I declare that the information contained herein is true and correct. DIAGNOSTIC IMAGING, INC. (Name of Applicant Corporation or Limited Liability Company)

Form No 32 Revised 6/97

(R.I. - 724 - 11/24/97) CC 19 LE FT CAS

(Authorized Person for the Limited Liability Company)

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