4/29/2013 **Commonwealth of Kentucky** 0417713 0417713 Alison Lundergan Grimes, Secretary o **KY Secretary of State** Received and Filed

Alison Lundergan Grimes Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Statement of Change or **Registered Office, Registered** Agent, or Both

Alison Lundergan Grimes 4/29/2013 11:27:08 PM Fee receipt: \$10.00

RAC

P601

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the registered office, registered agent, or both on behalf of

MAXUM HEALTH SERVICES CORP.

which is organized in the state of Delaware, and for that purpose submits the following statements:

1. Name of current registered agent	2. Registered agent is hereby changed to:
T CORPORATION SYSTEM	National Registered Agents, Inc.
3. Address of current registered office	4. Registered office is hereby changed to:
306 W MAIN ST SUITE 512	306 W MAIN ST SUITE 512 FRANKFORT, KY 40601

5. Signature of officer or chairman of the board	6. Consent of new agent
Sabrina Tillapaugh, Vice President	I consent to serve as the new registered agent on behalf of this corporation.
	Sabrina Tillapaugh, Asst. Secretary
Type or print name and title	Signature and Title
4/29/2013 11:27 PM	Type or print name and title
Date	