



**Alabama Licensing Board for General
Contractors**

445 Dexter Ave, Suite 3060 Montgomery, AL 36104
Phone: (334) 272-5030
Fax: (334) 395-5336



LICENSE VERIFICATION REQUEST AND AUTHORIZATION:

Name: **MID-SOUTH MEDICAL IMAGING
LLC** License #: **56394**

I authorize the Alabama Licensing Board for General Contractors to release information in regards to the status of my license.

ALABAMA BOARD VERIFICATION:

LICENSE #: **56394** Expiration Date: **4/30/2026**

Specialty: **REP: RECIPROCITY STATE OF MISSISSIPPI, SC: MEDICAL EQUIPMENT
INSTALLATION AND SERVICE**

Board Signature: _____ Date: **04/01/2026**
Tiffany Loveless
Executive Director