

F09000004918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

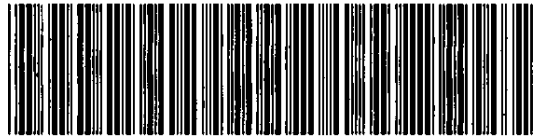
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

EP 11/11/09

11109-53204



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2009

RICHARD ROBINSON
28632 ROADSIDE DR. #210
AGOURA HILLS, CA 91301

SUBJECT: NATIONWIDE MEDICAL, INC.
Ref. Number: W09000053204

We have received your document for NATIONWIDE MEDICAL, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6921.

Maryanne Dickey
Document Specialist Supervisor

Letter Number: 609A00037332

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Nationwide Medical, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Richard Robinson

Name of Person

Nationwide Medical, Inc.

Firm/Company

28632 Roadside Dr. #210

Address

Agoura Hills, CA 91301

City/State and Zip code

rrobinson@nationwidemedical.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Robinson

Name of Person

at (818) 338-3707

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Cop
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Nationwide Medical, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Nevada 3. 611423158
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 8/5/02 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 28632 Roadside Dr. #210, Agoura Hills, CA 91301
(Principal office address)

Same as Principal office address
(Current mailing address)

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8. Conduct business as a DME mail order provider
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Marlene Weiss
Office Address: 1223 Oregon St. SE
Atlanta, Florida 32003
(City) (Zip code)

10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.

Marlene Weiss
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: Howard Siegel

Address: 28632 Roadside Dr. #210

Agoura Hills, CA 91301

Vice President: David Siegel

Address: 28632 Roadside Dr. #210

Agoura Hills, CA 91301

Secretary: _____

Address: _____

Treasurer: Rick Oberlander

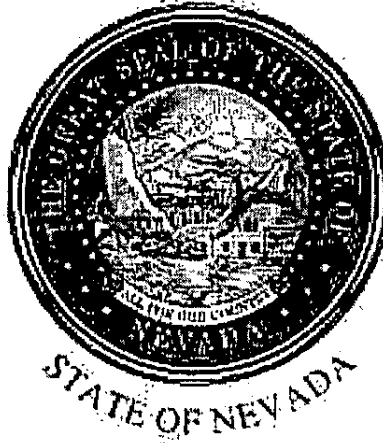
Address: 28632 Roadside Dr. #210, Agoura Hills, CA 91301

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Howard Siegel
(Signature of Director or Officer listed in number 12 of the application)

14. Howard Siegel, CEO
(Typed or printed name and capacity of person signing application)

SECRETARY OF STATE



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TALLAHASSEE, FLORIDA


CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NATIONWIDE MEDICAL, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 19, 2002, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 2, 2009.




ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20091202-3211
You may verify this electronic certificate
online at <http://www.nvsos.gov/>