



**B060000000364**

HOLD  
FOR FILING  
UCC SERVICES  
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824667178500-c

December 1, 2000

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**  
OSSATRON SERVICES OF TAMPA BAY, L.P.

3000003483853--9

-12/04/00--01004--005  
\*\*\*1785.00 \*\*\*1785.00

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
Articles & Amendments

☐ Fictitious Name Certificate

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

☐ Other

LP - 1785

FILED  
00 DEC - 1 PM 10:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

**RUSH**

RECEIVED  
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign Limited Partnership
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

32  
12/1

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. OssaTron Services of Tampa Bay, L.P.  
(Name of limited partnership as it is in the home state)
2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;  
must contain the word "LIMITED" or "LTD.")

3. Delaware 4. 11/02/2000  
(State of Formation) (Date of Formation)

5. NRAI Services, Inc.  
(Name of Registered Agent for Service of Process)

6. 526 E. Park Avenue  
(Street Address of Registered Office)

Tallahassee, Florida 32301  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

Ed Hand - Asst. Secretary  
(Agent must sign on this line)

8. 1841 West Oak Parkway, Suite A, Marietta, Georgia 30062

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

HT Orthotripsy Management  
Company, LLC

1841 West Oak Parkway, Suite A, Marietta, GA 30062

M00000002456

10. 1841 West Oak Parkway, Suite A, Marietta, Ga 30062  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

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12. 1841 West Oak Parkway, Suite A, Marietta, GA 30062

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 31<sup>st</sup> day of October, 2000.

Roy S. Brown, General Partner  
President

STATE OF Georgia

COUNTY OF Cobb

FILED  
00 DEC -1 AM 10:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

On this 31<sup>st</sup> day of October, 2000.

Roy S. Brown, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

Carol A. Drew  
(Notary Public Signature)

Carol A. Drew  
(Notary's Printed Name)

MY COMMISSION EXPIRES APRIL 24, 2004

Seal

My Commission Expires: \_\_\_\_\_

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED  
PARTNERSHIP**

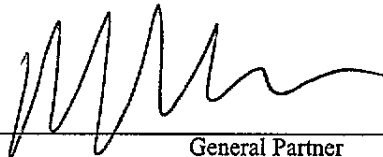
BEFORE ME the undersigned personally appeared Roy S. Brown, President of HT Orthotripsy Management Company, LLC  
a general partner of OssaTron Services of Tampa Bay, L.P., a (an) Delaware

limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 0.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 412,500.00.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

Signed this 31<sup>st</sup> day of October, 2000.

  
\_\_\_\_\_  
General Partner

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TALLAHASSEE, FLORIDA

STATE OF Georgia  
COUNTY OF Cobb

On this 31<sup>st</sup> day of October, 2000,

Roy S. Brown, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

  
(Notary Public Signature)

Carol A. Drew  
(Notary's Printed Name)

MY COMMISSION EXPIRES APRIL 24, 2004

Seal

My Commission Expires: \_\_\_\_\_