

B07 0000000049

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000083861120

01/12/07--01033--002 **1000.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FEB 14 PM 3:44

FILED

B07-49
92



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2007

KARI SMITH
1301 CAPITAL OF TEXAS HIGHWAY, SUITE 200
AUSTIN, TX 78746-6534

SUBJECT: HEALTH TRONICS GROUP, L.P.
Ref. Number: W07000002183

We have received your document for HEALTH TRONICS GROUP, L.P. and your check(s) totaling \$1000.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 907A00003225

2007 FEB 14 PM 3:44

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HealthTronics Group, L.P.
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida. Please return all correspondence concerning this matter to:

Kari Smith
(Contact Person)
HealthTronics Group, L.P.
(Firm/Company)
1301 Capital of Texas Highway, Suite 200B
(Address)
Austin, Texas 78746 - 6534
(City, State and Zip Code)

For further information concerning this matter, please call:

Kari Smith at (512) 721 - 4748
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$1,000.00 Filing Fees ☐ \$1,008.75 Filing Fees ☐ \$1,052.50 Filing Fees ☐ \$1,061.25 Filing Fee,
(\$965 Filing Fee and and Certificate of and Certified Copy Certified Copy, and
\$35 Registered Agent Status Certificate of Status
Fee)

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FEB 14 PM 3:44

FILED

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. HealthTronics Group, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)

2. Delaware

(State or Country of Formation)

3. 09/15/1997

(Date of Formation)

4. C T Corporation System

(Name of Registered Agent for Service of Process)

5. 1200 South Pine Island Road, Plantation, Florida 33324

(Florida street address for Registered Agent)

6. 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.

C T Corporation System

By: Howard L. Volz

Signature of Registered Agent

Howard L. Volz
Asst. Secretary

7. 1301 Capital of Texas Highway, Suite 200B

(Principal office address)

Austin, Texas 78746 - 6534

8. If limited partnership is a limited liability limited partnership, check box ☐

9. _____
(Mailing address)

10. Name, principal office address, and mailing address of each general partner:

Prime Medical Operating, Inc.

(Name)

F07-870

1301 Capital of Texas Highway, Suite 200B

(Street Address)

Austin, Texas 78746 - 6534

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FEB 14 PM 3:44

FILED

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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

Signed this 1st day of November, 20 06

Signature of a general partner:



2007 FEB 14 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fees: **\$1,000.00** (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional): **\$52.50**
Certificate of Status (optional): **\$8.75**

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHTRONICS GROUP, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF DECEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



2543125 8300

061188942

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5309923

DATE: 12-27-06