# F0000000529

#### TRANSMITTAL LETTER

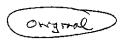
| To: Qualification/Tax Lien Section Division of Corporations   | -<br>  | #                              |
|---|--|--------------------------------|
| SUBJECT: SEE Centers,   | Inc.   |                                |
|   | ntion - must include suffix)   |                                |
| Dear Sir or Madam:  |  |                                |
| The enclosed "Application by Foreign Corporation for "Certificate of Existence", and check are submitted to transact business in Florida. | to register the above referenced foreign corporation   |                                |
| Please return all correspondence concerning this mate   | tter to the following:   | <u></u>                        |
| John L. Eda   | SSEE C   | _<br>                          |
| (Name   | of Person)   | j                              |
| SEE Centers (Firm/C   | , Inc. ORIGINAL 22   | <u> </u>                       |
| (Firm/C   | Company)   |                                |
| 4470 Northgo (Ad  | ite Court with   |                                |
| (Ád   | idress)  | • •                            |
| Sarasota, FL (City/S  | 34234 1/2  | 8                              |
| (City/S   | State/Zip)   | :                              |
| Should you need to call someone concerning this mat   | 70003111201<br>tter, please call: -01/26/0001063-<br>*****87.50 *****                        | 7 <b>——4</b><br>-005<br>*87.50 |
| John L. Edwards at (941   | 351-6501   | ,                              |
| Name of Person) at (941) (Name of Person)   | a Code & Daytime Telephone Number)   | 7 in in #4 <sup></sup>         |
|   |  |                                |
| STREET ADDRESS:   | MAILING ADDRESS:   |                                |
| Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St.   | Qualification/Tax Lien Section Division of Corporations P.O. Box 6327                        | # 100 m                        |
| Tallahassee, FL 32399   | Tallahassee, FL 32314  | - 11 -                         |
| Enclosed is a check for the following amount:   |  |                                |
| □ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status   | S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy 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<br>REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.   |           |
|--|-----------|
| SEE C. t. T. C.  | į.+ •     |
| 1. SEE Centers, Two,  (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)  |           |
| 2. Delaware  3. 65-0963821  (State or country under the law of which it is incorporated)  (FEI number, if applicable)  | TT 155 #  |
| (State or country under the law of which it is incorporated) (FEI number, if applicable)   | PT 144    |
| November 18, 1999 5. Respetual   |           |
| 4. November 18, 1999  5. Respectual  (Duration: Year corp. will cease to existor "perpetual")  |           |
| 6. December 23, 1999 (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)  |           |
|  | = .       |
| 7. 4470 Northgate Court Months of m  |           |
|  | : L:: %** |
| Sarasota, FL 3+234  (Current mailing address)  |           |
|  |           |
| 8. Any lawful act or activity - Medical Clinics - Not Doctor Owned (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)   | 4         |
| 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)   | -         |
| Name: John L. Edwards  |           |
| war Alasta C t   |           |
| Office Address: 4478 Norvagure Court  Sarasota 11 17 Florida, 34234  (Zip code)  | 1 ## +    |
| (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 designate this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comp with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and act the obligations of my position as registered agent. | 7         |
| (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 la  | w of      |
| which it is incorporated.  |           |

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

| A. DIRECTORS (Street address only - P.O. Box NOT acceptable)  |
|---|
| Chairman: _ ) onathan A. Burklund   |
| Address: 465 E. Saddle River Road, Ridgewood, NJ 07450  |
| Director: John L. Edwards   |
| Adhes 4656 Stone Rryc Trail, Sarasota, FL 34232   |
| Dreitons Je Clifford Finderss   |
| Address: 3120 NE 46th St., Fort Landerdale, FL 33308  |
| Director: Ray Krauss  |
| Address: 296 Thompson Mill Road, New Hope, PA 18938   |
|   |
| Director: Desigh A. Paul  |
| Address: 18849 Southeast Windward Island Lane, Junger, FL 33458   |
| ASS. S. T.  |
| B. OFFICERS (Street address only - P.O. Box NOT acceptable)   |
| President: John L. Edwards  |
| Address: where  |
|   |
| Vice President:   |
| Address:  |
|   |
| Secretary: Donathan A. Burklund   |
| Address: above  |
|   |
| Treasurer: John L. Edwards  |
| Address: above  |
|   |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| 13. John L. Bowards   |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)                   |
| 14. John L. Edwards President  (Typed or printed name and capacity of person signing application)               |
| (x) pod or printed name and capacity or person signing application)   |

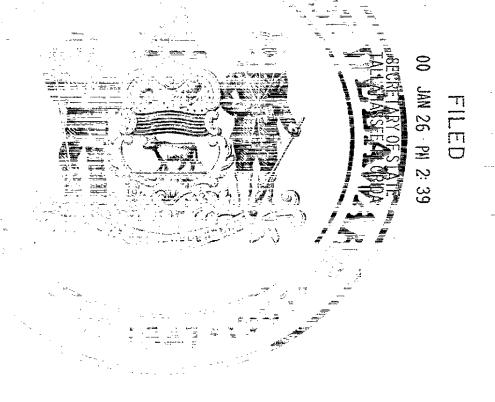


PAGE

### State of Delaware

#### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SEE CENTERS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF NOVEMBER, A.D. 1999.





Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

0093557

11-19-99

3128618 8300 991496142