

Document Number Only

# F00000000971

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

200003144692--3  
-02/23/00--01062--020  
\*\*\*\*\*8.75 \*\*\*\*\*8.75  
200003144692--3  
-02/23/00--01062--021  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Interpid of New Hampshire, Inc.

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Amendment

☐ Merger

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Limited Liability Partnership

☐ Fictitious Name

☐ Certified Copy

☐ Photo Copies

☒ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name  
Availability

Document  
Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

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CONNIE BRYAN

STATE  
CORPORATIONS  
FLORIDA

20 FEB 23 PM 12:30

RECEIVED

**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:*

00 FEB 23 PM 1:25  
CORPORATIONS

1. Intrepid of New Hampshire, Inc.  
(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. Minnesota  
(State or country under the law of which it is incorporated)
3. 41-1962916  
(FEI number, if applicable)
4. March 24, 1999  
(Date of Incorporation)
5. perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. anticipated - February 15, 2000  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. 6750 France Avenue South, Suite 275  
Edina, MN 55435  
(Current mailing address)
8. Home health agency and supplemental staffing  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**  
  
Name: C T Corporation System  
  
Office Address: 1200 South Pine Island Road  
Plantation, Florida, 33324  
(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.*

Michele R. Justesen, Asst. Secy.  
(Registered agent's signature)  
**Michele R. Justesen, Assistant Secretary**

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 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: Todd J. Garamella

Address: 6750 France Avenue South, Suite 275  
Edina, MN 55435

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only- P. O. Box NOT acceptable)**

President: Todd J. Garamella

Address: 6750 France Avenue South, Suite 275  
Edina, MN 55435

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Todd J. Garamella

Address: 6750 France Avenue South, Suite 275  
Edina, MN 55435

Treasurer: Greg Von Arx

Address: 6750 France Avenue South, Suite 275  
Edina, MN 55435

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

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Todd J. Garamella, Chairman & President

(Typed or printed name and capacity of person signing application)

00 FEB 23 PM 1:25  
RECEIVED  
CITY OF EDINA

State of Minnesota

# SECRETARY OF STATE

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00 FEB 23 PM 1:25  
OFFICE OF THE SECRETARY OF STATE

## Certificate of Good Standing

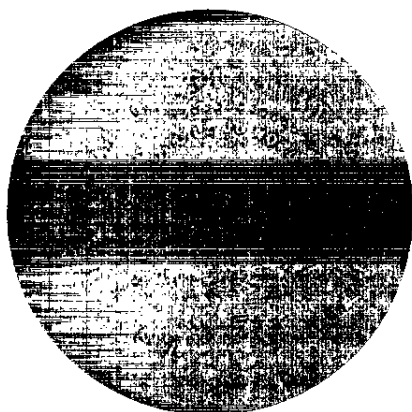
I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: The corporation listed below is a corporation formed under the laws of Minnesota; that the corporation was formed by the filing of Articles of Incorporation with the Office of the Secretary of State on the date listed below; that the corporation is governed by the chapter of Minnesota Statutes listed below; and that this corporation is authorized to do business as a corporation at the time this certificate is issued.

Name: Intrepid of New Hampshire, Inc.

Date Formed: 03/24/1999

Chapter Governed By: 302A

This certificate has been issued on 02/18/00.



*Mary Kiffmeyer*  
Secretary of State.