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C T CORPORATION SYSTEM	_			29
Requestor's Name 660 East Jefferson Str	eet			ဟ
Address Tallahassee, FL 32301 City State Zip	(850)222-1092 Phone	30	0003125 -02/07/000)1091010
CORPORAT	ION(S) NAME		*****70.00	*****70.00
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Total B	lood Managemen	it Inc		
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() Limited Partnership () Reinstatement () Limited Liability Part () Certified Copy	() Annual I () Reserva nership () Photo C	ition	() Other () Change (() Fictition () CUS	OF STATE
() Call When Ready Walk In () Mail Out	() Call if P		() After 4:30 Pick Up	3 / 5
Name Availability Document Examiner	217	PLEASE	RETURN EXTRA C FILE STAMPED THANKS !	TOTAL TIME
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W.P. Verifier	3/7/0	V daily	ELINANIZO?	
CB2F031 (1-89)			~ ~ ~	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 8, 2000

C T CORPORATION SYSTEM

TALLAHASSEE, FL

SUBJECT: TOTAL BLOOD MANAGEMENT, INC.

Ref. Number: W00000003374



We have received your document for TOTAL BLOOD MANAGEMENT, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Please note that we have RETAINED your \$70.00 filing fee.

The application indicates that this corporation began transacting business in Florida on April 1, 1999. If that is so, then penalty fees are owed.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1,150.00.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 700A00006286

3/10

February 7th. AMII: 02

February 7th. TEFFORIDA

FEBRUARY 7th. TEFFORIDA

FEBRUARY 7th. AMII: 02

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		W. P. E. C. P. E. E. P. C.		pm.)
IN COMPLIA REGISTER A	NCE WITH SECTION 607.1503, FLORIDA ST FOREIGN CORPORATION TO TRANSACT E L Blood Management 1	Comagos in the State	ING IS SUBMITTED B	
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(TANTHE OF 60			The appropriate and	ري ري
words or abl	reviations of like import in language as will clearly to or partnership if not so contained in the remark to	indicate that is in a	KATION" or	- ×
natutal perso	or partnership if not so contained in the name at p	mentach mixt it is a colbotatio	m instead of a	2 7
\ .	at parties at p	tesency .		·
2. Dela	ware	3. <u>94-31936</u> (FEI number, i	52-	5.5
(Syste or cont	try under the law of which it is incorporated)			
4. <u>Decer</u>	nber 20, 1993	Persofus S	if applicable)	-
(I	ate of incorporation) (Durat	1 st per cur		
6. April	1 1999	ion: Year corp. will cease to	··· -	
(Date fi	St transacted husiness in Florida) (SEE SUCTION)	3 COM 4 No. 44		
7. <u>2238</u>	st transacted business in Florida.) (SEE SECTIONS Bay Ridge Avenue	3 607.1501, 607.1502 and 81	7.155, F.S.)	-
Anna	2011s Marrland 2140	3	0	. 9
	(Current mailing address)			
•	· / demond detailed	•	<u> </u>	
8. <u>Blood</u>	1 Conservation and	related si	poolies :	発展工
(a extraor	(s) of corporation authorized in home state or count	ry to be carried out in state of	(Florida)	
A 37			r Florida)	200
2. Name and st	ceet address of Florida revistered agent. (D	O Box on Mail Dans D	IK.	70,71
	reet address of Florida registered agent: (P.	A. DOX OF MAIL DIOD BOX	NOT acceptable)	묶∽
Name	C T Corporation System			55 .
* AMETICAL	O - Oxideration System		23	
mer			GD	9 !''
Office Address:	1200 South Pine Island Road			co
		_		
	Plantation			
	- deliberati	, Florida, _33324		
		(Zip code)		
		(vib code)		
10. Revistered a	gent's acceptance:			
	ear a acceptance:			
Having been nume	d as registered agent and to accept service of proce tereby accept the appointment as registered agent t			
this application, I	was registered agent and to accept service of processoring accept the appointment as registered agent of all statutes relative to the proper and complete to	iss for the above stated corps	William at the nince decision	end in
Will the provisions	of all restricted and approximent as registered agent t	and agree to act in this capa-	city. I further news to annual	nem str
the philantines of	on accounts recause to the proper and complete?	Officemance of my duties of	ed I am family up to the com	pay
Gunnus (f) II	of all statutes relative to the proper and complete pay position as registered agent.	,	= चन्न उवामध्यार भारत दातर् द	ccept
	C T Corporationy System	h . 1 - 1		
	TYANN	1 Cl & Vachen	KEVIN J. GALLAGHEI	8
	(0-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-	HINGE TO	ACCIOTANT WAS	
	(Registered agent's signatu	rie)	ASSISTANT VICE PRE	SIDENT
11. Attached is a ce	rtificate of existence duly outbookings and	20.4		

uly 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

^{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) Address: Vice Chairman: _A Address: Address: Address: Address: Treasurer: Address: NOTE: Hence year may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

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

State of Delaware

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOTAL BLOOD MANAGEMENT, 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 FOURTH DAY OF FEBRUARY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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



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001057290



Edward J. Freel, Secretary of State 0238271

AUTHENTICATION:

02-04-00