

Registration Section

To:

Division of Corporations			
SUBJECT: ASSISTIVE Techno	1 - must include suffix)		
(Name of corporation	i - iirust hiviuus suiini)		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.			
Please return all correspondence concerning this matter Phil Saines	· 安米米米米	3963314 /0001096004 78.75 *****78.75	
(Name of	Person)	W-22952	
HSS STIVE 18ch/	npany)	_	
7 Wells Ave		**************************************	
(Addi	ress)		
Newton, MA	02459	_	
(City/Sta	te/Zip)		
Should you need to call someone concerning this matter, please call: $ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			
(Name of Person) at (6/7) 69/-9000 = 2 T			
STREET ADDRESS:	MAILING ADDRESS:	ILED 15 PM 10: 03	
Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	int.	
Enclosed is a check for the following amount:		11 / 15	
S70.00 Filing Fee S78.75 Filing Fee SCertificate of Status	Certified Copy Ce	.50 Filing Fee, rtificate of Status & rtified Copy	



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 20, 2000

PHIL SAINES ASSISTIVE TECHNOLOGY, INC. 7 WELLS AVE. NEWTON, MA 02459

SUBJECT: ASSISTIVE TECHNOLOGY, INC.

Ref. Number: W00000022952

We have received your document for ASSISTIVE TECHNOLOGY, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/reveked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing them name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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 \$4615.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 100A00049615

OO NOV 15 PM IO: 03
SECRETARY OF STATE



October 30, 2000

Mr. Michael Mays Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Mr. Mays,

Assistive Technology, Inc (ATI) is in receipt of the correspondence from the Florida Department of State (Ref # W0000022952). The correspondence states that ATI will be penalized \$4,615 for transacting business in Florida prior to qualification.

ATI requests that the penalty be rescinded since the business that ATI has transacted in the State of Florida from 10/96 until now consisted of filling orders from our office in Massachusetts. The orders are taken at and the products are shipped (directly to our customers) from our office in Newton, Massachusetts. ATI understands that this form of business falls into the exclusion provided in subsection 2i (transacting business interstate commerce) under Florida Statute 607.1501. Therefore, a penalty should not apply.

The State's correspondence to ATI was in response to ATI submitting an application request in September to register as a foreign corporation that **could** transact business in Florida. We submitted this application because we wanted to begin having order taken directly in Florida and product delivered from a local presence (due to business prowth) As such, we established a registered agent as identified in our application and submitted for Florida registration. ATI wants to begin transacting business in Florida in December and would appreciate the State completing the registration process.

If there are any questions, please contact me directly at (617) 641-9000.

JAMES C. LEWIS

President & CEO

NOTARIZED BY:

DATE:___

DIANE KEEFE
MY COMMISSION EXPIRES
OCTOBER 30, 2003

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

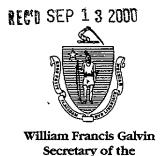
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	
ASSISTING TOCKNOLO TO THE STATE OF FLORIDA.	
(Notice of Corporation; must include the ward protection of the second o	
words or abbreviations 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. Massachusetts (State or country under the law of which it is incorporated) 3. 04-3284593 (FEI marrier if applicable)	
(State or country under the law of which it is incorporated) 3. 04-3284593 (FEI number, if applicable)	
4 June 1995 & Recorded	
(Duration: Year corp., will cease to exist or the exist o	
6. (0/96)	
(Date first transacted business in Florida. If coaporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607 1502 and 637	
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7. a. 7 Wells Ave, Newton, MA 02459	
(Principal office address)	
b. 7 Wells Ave Newton MA 02459 (Current mailing wideses)	
(Current mailing address)	
* Sale of augmentative communication device == =	_
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	=
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)	
Name: Michael Sentarrangelo	
ASSISTIVE TECHNOLOGY DIC.	
Office Address: 1642 W. 6946 947	
Higleah , Florida 33012	
(Zip code)	
0. Registered agent's acceptance:	
Harris and the second s	

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.

(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 law of which it is incorporated.

12. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: James C. Cenis
Address: Assistive technology, Inc, 7 Wells Ave. Newton MA 02459
Vice Chairman:
Address:
Director: Anhold + bleichroedor
Address: 1345 Ave. of the thericas
New, York, NY 10105
Director: Easton Capital
Address: 415 Madison Ave.
New York, NY 10017
B. OFFICERS
President: <u>James C. Lews</u>
Address: Assistive technology, Inc., 7 Wells Ave.
Newton MA 02459
Vice President:
Address:
SZ G
Secretary: <u>James</u> C. Lewis
Address: ASSistive Technology, Inc., 7 Wells Ave.
Newton MA 02459
Treasurer: Tames C. Cerris
Address: Assistive Technology, Inc. 7 Wells Ave,
Newton, MA 02459
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. James C. Lewis, Ct Ot VICIA (Typed or printed name and capacity of person signing application)



Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth State Kouse, Boston, Massachusetts 02133

September 12, 2000

TO WHOM IT MAY CONCERN:

I hereby certify that

ASSISTIVE TECHNOLOGY PROJECT, INC.

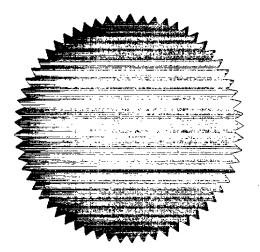
appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on June 7, 1995.

I also certify that by Articles of Amendment filed here August 1, 1997, the name of said corporation was changed to

ASSISTIVE TECHNOLOGY, INC.

I also certify that so far as appears of record here, said corporation still has texistence.

SECREMARY OF STATE



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Travino Galicin

Secretary of the Commonwealth

* MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.