To: Qualification/Tax Lien Section 742

Division of	Corporations		• •
SUBJECT:	EMB Medical Services	s, Inc.	
	(Name of corporat	ion - must include suffix)	
Dear Sir or Madam:	:		
	ication by Foreign Corporation for tence", and check are submitted to Florida.		
Please return all con	respondence concerning this matte	er to the following:	
	Thomas Pierson		
	(Name o	of Person)	
	EMB Medical Services,	Inc.	
	(Firm/C	ompany)	
	PO Box 20876		والمالي والمساور
	(Add	dress)) -12/05/0001015014 *****70.00 ******70.00
·	Keizer, OR 97307		·
Cl	, ,		00034856630 -02/08/0101087001 ****950.00 ****950.00
Should you need to o	call someone concerning this matt	er, please call:	W-29167
Esther Pier	son 503	390-0995	
(Name of P	Person) (Are	a Code & Daytime Telepho	ne Number)
STREET ADDRES	· SS:	MAILING ADDRESS:	OFFEB TALLAND
Qualification/Tax Li Division of Corporat		Qualification/Tax Lien S Division of Corporations	-6 PM 12: 59 ASSEE FLORIDA
409 E. Gaines St. Гаllahassee, FL 323	399	P.O. Box 6327 Tallahassee, FL 32314	PM 12: 59 PM 12: 59 E FLORIDA
Enclosed is a check t	for the following amount:		
3 \$70.00 Filing Fee	Certificate of Status	3 \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



Department of State

Memorandum Office of the General Counsel

TO:

File

FROM:

Gerard York, Assistant General Counsel

DATE:

February 6, 2001

RE:

EMB Medical Services, Inc.

Based on my review of the file and the payments received from the corporation, it is my recommendation that this file be closed. Corporation has paid outstanding report fees from 1997 of \$450.00 and foreign non-qualified penalties of \$500.00 assessed in a lump sum. Corporation wishes to be qualified to do business in the State of Florida. Accordingly, it is recommended corporation be issued a certificate of authority.

/gty





FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 13, 2000

THOMAS PIERSON EMB MEDICAL SERVICES, INC. PO BOX 20876 KEIZER, OR 97307

SUBJECT: EMB MEDICAL SERVICES, INC.

Ref. Number: W00000029167

O1 FEB -6 PH 12: 59

We have received your document for EMB MEDICAL SERVICES, 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:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate 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 \$3,450.00.

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) 487-6958.

Lee Rivers

Document Specialist

Letter Number: 400A00062680

OFFEB-6 PM 12: 59



December 22, 2000

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Attn: Mr. Lee Rivers

Dear Sir:

I am in receipt of your letter dated December 13, 2000 regarding not filing a Certificate of Good Standing with your state. We received a letter in October 2000 asking us to submit an Application by Foreign Corporation for Authorization to Transact Business in Florida along with a \$70 filing fee. We did this, and felt that we had complied with all necessary requirements in this matter.

We were notified in your December 13th letter that we needed to file a *Certificate of Good Standing* with your state. We were unaware of any requirements for this certificate. We have filed all the necessary tax returns for the time we've been conducting business in Florida, and have been operating in good faith. At no time have we been notified that we were delinquent in any required documentation for conducting business in Florida. There was no willful intent on our part to withhold any required documentation. It was simply our not being aware of this documentation, and we would like to ask that you waive the penalty of \$3,450 on our behalf.

All future business in your state will continue to be conducted with the utmost integrity on our part, and we will strive to comply with any requirements that your state has.

Enclosed please find our *Certificate of Good Standing* from the State of Oregon. Thank you for your assistance.

Sincerely,

Mr. Thomas Pierson

President

TP:eap Enclosure ON FEB -6 PM 12: 59
SECRETARY OF STATE

December 28, 2000

Dear Mr York;

Attached is the file for EMB MEDICAL SERVICES, INC., an Oregon corporation. We sent them an FNQ letter and they submitted \$70.00 and an application stating they began transacting in Florida in 1997. In response to our penalty letter they sent the attached letter of December 22, 2000, requesting that "you waive the penalty of \$3,450.00 on our behalf."

Please let me know if I can be of any help.

Lee Rivers 487-6958





FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State OFFICE OF THE GENERAL COUNSEL

FACSIMILE TRANSMITTAL

TO FAX NUMBER: 503-390-1130

Please deliver the following pages to:

NAME: Mrs. Esther Pierson

COMPANY: EMB Medical Services, Inc.

CITY/STATE: Keizer, Oregon

SENDER: Gerai

Gerard T. York, Esq.,

Assistant General Counsel

(850) 414-5514

DATE/TIME:

01/04/01 1:51 PM

NUMBER OF PAGES (including transmittal sheet):2

FROM FAX:

850/922-5763 (Suncom 292-5763)

COMMENTS: This communication is in response to our conversation Yesterday regarding annual report fees and statutory penalties which would be assessed against EMB Medical Services, Inc., under section 607.1502(4), Florida Statutes.

An application filed with the Division of Corporations indicates EMB has transacted business in Florida since 1997. Accordingly, an amount of \$3450.00 is due, reflecting annual report fees of \$450.00 and statutory penalties of \$3000.00. We would, however, offer to settle the issue of annual report fees and foreign non-

qualified penalties from EMB for the sum of \$950.00, reflecting annual report fees from 1997 of \$450.00 and penalties of \$500.00 assessed in a lump sum to avoid litigation. This offer remains in effect until February 16, 2001.

Upon completion of the application and receipt of a check in that amount payable to the Department of State, Division of Corporations, I will instruct the Division of Corporations to issue EMB Medical Services, Inc., a Certificate of Authority to transact business in Florida. Please mail the check to this attorney at: Office of General Counsel, LL-10, The Capitol, Tallahassee, Florida 32399-0250.

Please do not hesitate to contact me should you have any questions.

If there are any problems in receiving this transmission, call Cara at 850/414-5536 or Suncom 994-5536.

LL-10 • THE CAPITOL • TALLAHASSEE, FLORIDA 32399-0250

O1 FEB -6 PM 12: 59
SECRETARY OF STATE

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.

 EMB Medical Services, Inc. 		
(Name of corporation; must include the word "INCORPOR	ATED", "COMPANY", "CORPORATION" or	
words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	early indicate that it is a corporation instead of a	
The same of the sa	out protonic,	
2. Oregon	3 84-1274717	
(State or country under the law of which it is incorporated)	(FEI number, if applicable)	
46/30/94 5.	Perpetual	
4. (Date of incorporation) 5.	(Duration: Year corp. will cease to exist or "perpetual")	
61997		
(Date first transacted business in Florida.) (SEE SECT	TONS 607.1501, 607.1502 and 817.155, F.S.)	
7. PO Box 20876		
Keizer, OR 97307		
(Current mailing a	ddress)	
8. Vaccinations		
8. Purpose(s) of corporation authorized in home state or	r country to be carried out in state of Florida)	
9. Name and street address of Florida registered agents	O Boy or Mell Day Now Page 17	
Name: Lorrie Blitch	SSE OF THE PROPERTY OF THE PRO	
Name: <u>Lorrie Blitch</u> Office Address: <u>3673 Marsh Park et.</u> <u>Jacksonville</u>	PH 12: 59 PH 12: 59	
Jacksonallo	TATE ORIDE	
	(Zip code)	
10. Registered agent's acceptance:		
Having been named as registered agent and to accept service of	of process for the above stated corporation at the place designated	

traving 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. Name	es and addresses of officers and/or directors: (Strae) address ONLY - P.O. Box NOT acceptable)
A. DIRE	CTORS (Street address only - P.O. Box NOT acceptable)
Chairmañ	
Address:	
-	
Vice Chair	rman:
Address:	
_	
Director:	
Address: _	<u> </u>
-	
Director:	
D OFFI	THE T
	CERS (Street address only - P.O. Box NOT acceptable)
	Thomas Pierson 6290 Trail Ave NE
Address: _	<u> </u>
-	Keizer, OR 97303
	lent: Kurt Duffens
Address: _	3532 NW Loriann Dr
	Portland, OR 97229
Secretary:	Esther Pierson
Address: _	6290 Trail Ave NE
_	Keizer, OR 97303
Treasurer:	
Address: _	
_	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers and/or directors.
13	Other Lieva
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	(Typed or printed name and capacity of person signing application)

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

I, BILL BRADBURY, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

EMB MEDICAL SERVICES, INC.

was

incorporated

under the Oregon

Business Corporation Act

on

June 30, 1994

and is active on the records of the Corporation Division as of the date of this certificate.





In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BILL BRADBURY, Secretary of State

By _______

r Heather S. Davis December 22, 2000