

ACCOUNT NO.

072100000032

REFERENCE

607755

167295A

AUTHORIZATION

COST LIMIT \$ 78.75

ORDER DATE: June 4, 2002

ORDER TIME : 10:26 AM

ORDER NO. : 607755-005

CUSTOMER NO: 167295A

700005677757--\$

CUSTOMER: Ana Rojas, Legal Assistant

Gary C. Matzner, Esq

Suite 1146

2601 South Bayshore Drive

Miami, FL 33133

#### FOREIGN FILINGS

NAME:

MEDFIRST CORPORATION



XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

\_\_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON I Saras Lean 1114 TIVES 30 PORTUGE EXAMINER: \_

HECEINED



#### RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

l, the undersigned	Gary C. Matzner	, do hereby certify
	(Name)	•
that this Resolution of the	Beard of Directors of	·····
	MedFirst Corporation	
	(Corporate Name)	
a corporation duly organiz	ed and existing under the laws of the Stat	te of,
was duly adopted on	April 30	, 2002
Be it resolved, that	MedFirst Corporation (Corporate N	ame)
organized and existing in t	he State of Delaware	
MedFirst Corporation Delaware		for use in Florida.
Dated: May 1, 2002	Signature of either Chairman, Vice Chai	rman of any officer
	Signature of entire Charman, Vice Cha	пвал он яву описег
	Gary C. Matzner, Treasurer	
	Type or print name	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tailahassee, FL 32314

INHS19(1700)

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

MedF	DREIGN CORPORATION TO TRANSACTION TO TRANSACTION	
words or abbre		CT BUSINESS IN THE STATE OF FLORIDAL RATED", "COMPANY", "CORPORATION" or learly indicate that it is a corporation instead of a ne at present.)
Delav		J
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
March	28, 2002	
(Dat	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
Upon o	qualification	
(Date first trans		s not transacted business in Florida, insert "upon qualification.") 1501, 607.1502 and 817.155, F.S.)
	2601 South Bayshore Drive,	Suite 1146, Miami, FL 33133
	(Principal office	address)
	2601 South Bayshore Drive, S	Suite 1146, Miami, FL 33133
	(Current mailing	address)
to provi	de manage care and to engage	e in the transaction of any and all lawful
business	activities-permitted under	the laws of Florida
(Purpose	(s) of corporation authorized in home state of	or country to be carried out in state of Florida)
Name and st	reet <mark>address</mark> of Florida registered age	ent: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	Gary C. Matzner, Esq.	
	2601 South Bayshore Drive, Su	uite 1146
ffice Address:		
ffice Address:	Miami	Florida 33133
frice Address:	Miami (City)	, Florida 33133 (Zip code)
	(City)	, i rottua
). Registered : aving been na signated in thi rther agree to	(City)  Agent's acceptance:  The med as registered agent and to accept so  The is application, I hereby accept the appo  The comply with the provisions of all status	(Zip code)  service of process for the above stated corporation at the place ointment as registered agent and agree to act in this capacity. tes relative to the proper and complete performance of my
). Registered : aving been na signated in thi rther agree to	(City)  Agent's acceptance:  med as registered agent and to accept s  is application, I hereby accept the appo- comply with the provisions of all status familiar with and accept the obligation	(Zip code)  service of process for the above stated corporation at the place ointment as registered agent and agree to act in this capacity. tes relative to the proper and complete performance of my
. Registered aving been nat signated in the orther agree to	(City)  Agent's acceptance:  The med as registered agent and to accept so  The is application, I hereby accept the appo  The comply with the provisions of all status	(Zip code)  service of process for the above stated corporation at the place ointment as registered agent and agree to act in this capacity. Ites relative to the proper and complete performance of my as of my position as registered agent.

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.

## Names and business addresses of officers and/or directors:

A. DIREC		15 82
Chairman:		150 7
Address: _	3651 Thompson Road, Lake Mary, FL 32746	TO THE POPULATION OF THE POPUL
<del></del>		555 - 1
Vice Chairn	nan;	700
Address: _		ORIGINATE TO
 Director:	Robert B. Schyberg	
Address:	3651 Thompson Road, Lake Mary, FL 32746	-
 Director:		
B. OFFIC	CERS  Robert B. Schyberg	
President: _		
Address:	3651 Thompson Road, Lake Mary, FL 32746	·
Vice Preside	ent:	
Address:		<del></del>
 Secretary: _	Robert B. Schyberg	
Address:	3651 Thompson Road, Lake Mary, FL 32746	
Freasurer:	Gary C. Matzner	
Address: _	2601 South Bayshore Drive, Suite 1146, Miami, FL 33133	
NOTE: If	necessary, you may attach an addendum to the application listing additional officers at	nd/or directors.
13	Myn	
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the	application)
14	Gary C. Matzner, Treasurer  (Typed or printed name and capacity of person signing application)	· · · · · · · · · · · · · · · · · · ·

# Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEDFIRST CORPORATION" 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 ENE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DATAON MARCH, A.D. 2002.



Flarriet Smith Windson, Secretary of State

AUTHENTICATION: 1694080

DATE: 03-28-02

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