

FO2000003735

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Huntleigh Healthcare Rentals Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

700006236147--5
-07/08/02--01011--006
*****78.75 *****78.75

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 to the following:

Edward Licciardi, Controller
(Name of Person)
Huntleigh Healthcare Rentals Inc.
(Firm/Company)
40 Christopher Way
(Address)
Eatontown NJ 07724-3327
(City/State and Zip code)

FILED
02 JUL 23 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Edward Licciardi at (732) 578-9898
(Name of Person) (Area Code & Daytime Telephone Number)

Name	STREET ADDRESS:
Availability	Registration Section
Document	Division of Corporations
Examiner	409 E. Gaines St. Tallahassee, FL 32399
Updater	Enclosed is a check for the following amount:
Updater	<input type="checkbox"/> \$70.00 Filing Fee
Verifier	<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certificate of Status
Acknowledgement	DOC
W. P. Verifier	DOC

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

① date 1st transact business

② purpose

☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

5 pages
W020000019609

FO2000003735



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 8, 2002

EDWARD LICCIARDI
HUNTLEIGH HEALTHCARE RENTALS INC.
40 CHRISTOPHER WAY
EOCTONTOWN, NJ 07724-3327

SUBJECT: HUNTLEIGH HEALTHCARE RENTALS, INC.
Ref. Number: W02000019609

We have received your document for HUNTLEIGH HEALTHCARE RENTALS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 602A00042411

**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.*

1. Huntleigh Healthcare Rentals 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. Delaware 3. 22-3237271
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/11/1993 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. May 2002
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 3049 Drame Field Road Lakeland FL 33811
(Principal office address)
40 Christopher Way Eatontown NJ 07724-3327
(Current mailing address)
8. Rental of Durable Medical Devices
(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: Corporation Service Company
Office Address: 1201 Hays St.
Tallahassee FL 32301, Florida _____
(City) (Zip code)

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02 JUL 23 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Cath. E. Mayers
Catherine E. Mayers (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 - none

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Robert S. Angel

Address: 40 Christopher Way
Eatontown NJ 07724-3327

Vice President: Francis G. Hackett

Address: 40 Christopher Way
Eatontown NJ 07724-3327

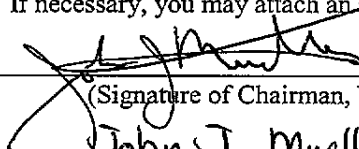
Secretary: Audrey A. Witke

Address: 40 Christopher Way Eatontown NJ 07724-3327

Vice President John J. Mueller

Treasurer: 40 Christopher Way Eatontown NJ 07724-3327

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. John J. Mueller Vice-President
(Typed or printed name and capacity of person signing application)

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02 JUL 23 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

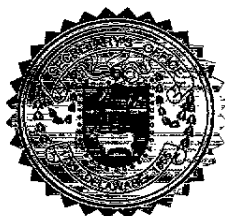
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HUNTLEIGH HEALTHCARE RENTALS 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 SEVENTEENTH DAY OF JUNE, A.D. 2002.

FILED
02 JUL 23 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2339850 8300

020371279

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1835041

DATE: 06-17-02