

F030000003676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

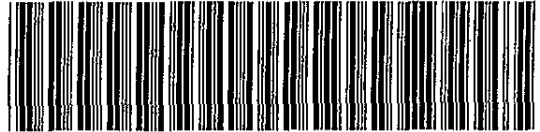
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000021620480

07/21/03--01065--006 \*\*87.50

FILED

2003 JUL 21 PM 1:47

CLERK OF COURTS  
TALLAHASSEE, FLORIDA

J. BRYAN JUL 25 2003

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MDS TECHNOLOGIES, INC.  
(Name of corporation - must include suffix)

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 to the following:

Richard Magnone

(Name of Person)

Reda, Ciprian & Magnone

(Firm/Company)

8501 West Higgins Road, Ste. 440

(Address)

Chicago, Illinois 60631

(City/State and Zip code)

FILED  
2003 JUL 21 PM 1:47  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Richard Magnone  
(Name of Person)

at ( 773 ) 399-1122  
(Area Code & Daytime Telephone Number)

### STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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. MDS TECHNOLOGIES, 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. Illinois

(State or country under the law of which it is incorporated)

3. 71-0906508

(FEI number, if applicable)

4. 9/9/02

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(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. 1749 Golf Road, Suite 332, Mt. Prospect, IL 60056

(Principal office address)

1749 Golf Road, Suite 332, Mt. Prospect, IL 60056

(Current mailing address)

8. The transaction of any or all lawful businesses for which corporations may be incorporated under the Illinois Business Corporation Act of 1983 and the amendments thereto.  
(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: Robert G. Little

Office Address: 6914 Williams Drive

Tampa

(City)

Florida 33634

(Zip code)

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.*



(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.

2003 JUL 21 PM 1:47  
FILED  
DEPARTMENT OF CORPORATIONS  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Trevor T. Triffo  
Address: 1749 Golf Road, Suite 332  
Mt. Prospect, IL 60056

Vice Chairman: \_\_\_\_\_  
Address: \_\_\_\_\_

Director: Trevor T. Triffo  
Address: 1749 Golf Road, Suite 332  
Mt. Prospect, IL 60056

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

FILED  
2003 JUL 21 PM 1:47  
CLERK OF CORPORATIONS  
ALLAHSEE, FLORIDA

B. OFFICERS

President: Trevor T. Triffo  
Address: 1749 Golf Road, Suite 332  
Mt. Prospect, IL 60056

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: Trevor T. Triffo  
Address: 1749 Golf Road, Suite 332, Mt. Prospect, IL 60056

Treasurer: Trevor T. Triffo  
Address: 1749 Golf Road, Suite 332, Mt. Prospect, IL 60056

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Trevor T. Triffo  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Trevor T. Triffo  
(Typed or printed name and capacity of person signing application)

File Number

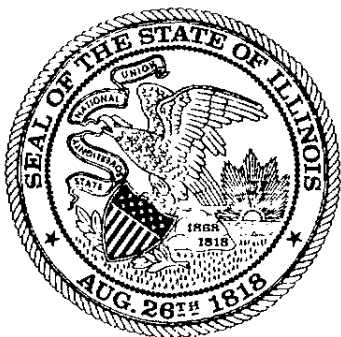
6244-023-6



*To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do*

*hereby certify that* MDS TECHNOLOGIES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE SEPTEMBER 9, 2002, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS\*\*\*\*\*



*In Testimony Whereof, I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this* 14TH  
day of JULY 2003  
A.D.

*Jesse White*

SECRETARY OF STATE