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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ARNA Education and Research Foundation, 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:

David Walter Norris
(Name of Person)

Howe & Hutton, Ltd.
(Firm/Company)

20 North Wacker Drive, Suite 4200
(Address)

Chicago, IL 60606-9833
(City/State and Zip code)

For further information concerning this matter, please call:

David Walter Norris at (312) 263-3001
(Name of Person) (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

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JUL 12 1978
TALLAHASSEE, FLORIDA

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**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. ARNA Education and Research Foundation, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois

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

3. _____

(FEI number, if applicable)

4. July 11, 1997

(Date of incorporation)

5. perpetua

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

6. July 1, 2004

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 7794 Grow Drive, Pensacola, Florida 32514

(Principal office address)

7794 Grow Drive, Pensacola, Florida 32514

(Current mailing address)

8. Charitable organization

(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 NOT acceptable)

Name: Belinda Puetz

Office Address: 7794 Grow Drive

Pensacola

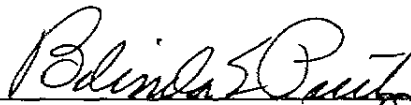
(City)

, Florida 32514

(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.

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

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JULY 12 2004
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: See attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: see attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Belinda E. Puetz
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. BELINDA E. PUETZ EXECUTIVE DIRECTOR
(Typed or printed name and capacity of person signing application)

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American Radiological Nurses Association (ARNA)

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Delma Armstrong, BSN, RN, CRN
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Immediate Past President (2003)

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Secretary (2005)

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Gainesville, FL 32607

Board Member (2007)

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Fax: (215) 615-3545
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Mailing Address:
145 Meadowland Dr.
Collegeville, PA 19426

Executive Director

Belinda E. Puetz, PhD, RN
Puetz & Associates
Pensacola, FL
Work: (850) 474-7292
Fax: (850) 484-8762
E-mail: bepuetz@puetzamc.com
Mailing Address:
7794 Grow Drive
Pensacola, FL 32514

National Office

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arna@puetzamc.com
www.arna.net

File Number

5950-048-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

ARNA EDUCATIONAL AND RESEARCH FOUNDATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JULY 11, 1997, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS A DOMESTIC CORPORATION IN GOOD STANDING 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

day of

JUNE

A.D.

8TH

2004

Jesse White

SECRETARY OF STATE