

F04000004384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

(Business Entity Name)

(Document Number)

## Certificates of Status

Special Instructions to Filing Officer:

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11704-04-0009-040 \*#16,76

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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MedNet I.M.S., 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:

Brian M. McCoy

(Name of Person)

MedNet I.M.S., Inc.

(Firm/Company)

P.O. Box 957929

(Address)

Duluth, Georgia 30095

(City/State and Zip code)

For further information concerning this matter, please call:

Brian M. McCoy at ( 678 ) 957-3700  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS: MAILING ADDRESS:**

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

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. MedNet I.M.S., 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. Georgia** **3. 58-2190727**

(State or country under the law of which it is incorporated) (FEI number, if applicable)

**4. April 10, 1996** **5. Perpetual**

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

**6. December 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. 2470 Satellite Boulevard, Duluth, Georgia 30096**

(Principal office address)

**P.O. Box 957929, Duluth, Georgia 30095**

(Current mailing address)

**8. Medical Examination Scheduling**

(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: **Jane Kenovich**

Office Address: **106 Commerce Street, Suite 102**

**Lake Mary**, Florida **32746**  
(City) (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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TALLAHASSEE, FLORIDA

**A. DIRECTORS**

Chairman: Brian M. McCoy

Address: 345 Bardolier

Alpharetta, Georgia 30022

Vice Chairman: David L. Hatmaker

Address: 1776 Simonton Bridge Road, Watkinsville, Georgia 30677

Director: Bobby Collins

Address: 370 Crown Vetch Lane

Alpharetta, Georgia 30005

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

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

**B. OFFICERS**

President: Brian M. McCoy

Address: 345 Bardolier

Alpharetta, Georgia 30022

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

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

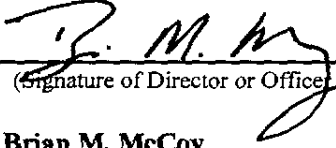
Secretary: Bobby Collins

Address: 370 Crown Vetch Lane, Alpharetta, Georgia 30005

Treasurer: \_\_\_\_\_

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

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

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. Brian M. McCoy  
(Typed or printed name and capacity of person signing application)

**Secretary of State**  
**Corporations Division**  
**315 West Tower**  
**#2 Martin Luther King, Jr. Dr.**  
**Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 043070296  
CONTROL NUMBER : K612865  
DATE INC/AUTH/FILED: 04/10/1996  
JURISDICTION : GEORGIA  
PRINT DATE : 11/02/2004  
FORM NUMBER : 211

MEDNET  
BRIAN M. MCCOY  
POB 957929  
DULUTH, GA 30095

**CERTIFICATE OF EXISTENCE**

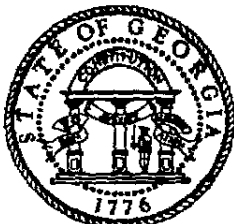
I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**MEDNET I.M.S., INC.**  
**A DOMESTIC PROFIT CORPORATION**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Cathy Cox  
Secretary of State