

F 050000003813

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax and/or number (shown below) on the top and bottom of all pages of the document.

((H05000160382 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

FOREIGN PROFIT QUALIFICATION

Ohio Medical Corporation

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

RECEIVED

05 JUN 30 PM 1:11

DIVISION OF CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN 30 AM 10:28

FILED

W 07/01/05

Electronic Filing Menu

Corporate Filing

Public Access Help

Up

06/30/2005 12:51
JUN 30 2005 12:51

8508785926
CT CORP

CT CORPORATION SYSTEM

PAGE 02/04

312 263 0124 P.02/04

**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. Ohio Medical Corporation

(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. Delaware

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

3.

33-1119797

(FEI number, if applicable)

4. June 10, 2005

(Date of incorporation)

5.

Perpetual

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

6. N/A

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

7. 287 Bowman Avenue, Third Floor, Purchase, NY 10577

(Principal office address)

c/o Wildman Harrold -John Eisel, 225 W. Wacker Dr., Chicago, IL, 60606

(Current mailing address)

To engage in any lawful act or activity for which corporations may be organized
under the Delaware General Corporation Law, as amended.

8.

(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: **CT Corporation System**

Office Address: **1200 South Pine Island Road**

Plantation

(City)

, Florida 33324

(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.*

CT Corporation System

By: **Lauren F. Jones**

(Registered agent's signature)

Lauren F. Jones

Assistant Secretary

**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. Name and business addresses of officers and/or directors:

FILED
05 JUN 30 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/30/2005 12:51 8508785926
JUN-30-2005 10:50 CT CORP

CT CORPORATION SYSTM

PAGE 03/04

312 263 0124 P.03/04

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Michael Tokars

Address: 287 Bowman Avenue, Third Floor, Purchase, NY 10577

Director: _____

Address: _____

B. OFFICERS

President: Michael Tokars

Address: 287 Bowman Avenue, Third Floor, Purchase, NY 10577

Vice President: David Hadani

Address: 287 Bowman Avenue, Third Floor, Purchase, NY 10577

Secretary: David Hadani

Address: 287 Bowman Avenue, Third Floor, Purchase, NY 10577

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. David Hadani, Secretary

(Typed or printed name and capacity of person signing application)

05 JUN 30 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

06/30/2005 12:51
JUN-30-2005 10:50

8508785926
CT CORP

CT CORPORATION SYSTM

PAGE 04/04

312 263 0124 P.04/04

Delaware

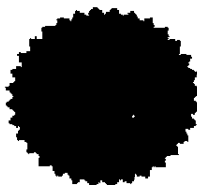
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OHIO MEDICAL 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 THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF JUNE, A.D. 2005.

FILED
05 JUN 30 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3983824 8300
030537104



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3984263

DATE: 06-28-05

TOTAL P.04