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Florida Department of State
Division of Corporations
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Fax Number : (850) 205-0381

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FOREIGN PROFIT/NONPROFIT CORPORATION

OmniSonics Medical Technologies, Inc.

Certificate of Status	0
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Page Count	05
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OmniSonic Medical 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:

Megan M. Foley, Esq.

(Name of Person)

Moynihan Partners LLC

(Firm/Company)

20 Park Plaza, Suite 479

(Address)

Boston, MA 02116

(City/State and Zip code)

For further information concerning this matter, please call:

Megan M. Foley, Esq.

(Name of Person)

at (617) 948-2516

(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. OmniSonic Medical Technologies, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "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. 223254155

(FEI number, if applicable)

4. 05/04/2000

(Date of incorporation)

5. Perpetual

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

6. 10/07/2005

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

7. 66 Concord Street, Wilmington, MA 01887

(Principal office address)

Same

(Current mailing address)

8. Hiring and Supporting Sales Representatives to Sell Proprietary Medical Devices

(Purpose(s) of corporation authorized to 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: Carrie B. [Signature]

(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 SEE ATTACHMENTChairman: John L. Brooks, IIIAddress: 66 Concord StreetWilmington, MA 01887Vice Chairman: (See attachment for additional directors)

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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 TALLAHASSEE, FLORIDA

B. OFFICERS SEE ATTACHMENTPresident: Richard G. GanzAddress: 66 Concord StreetWilmington, MA 01887Vice President: Daniel E. GeffkenAddress: 66 Concord StreetWilmington, MA 01887Secretary: Daniel E. GeffkenAddress: 66 Concord Street Wilmington, MA 01887Treasurer: Daniel E. GeffkenAddress: 66 Concord Street Wilmington, MA 01887

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. Richard G. Ganz, President

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

Attachment 12(A) - Directors

OmniSonics Medical Technologies, Inc.

Board of Directors

John L. Brooks, III (Chairman)
66 Concord Street
Wilmington, MA 01887

Stephen Bloch, M.D.
66 Concord Street
Wilmington, MA 01887

Donald Woods
66 Concord Street
Wilmington, MA 01887

Robert More
66 Concord Street
Wilmington, MA 01887

David Stewart
66 Concord Street
Wilmington, MA 01887

Bruce Krattenmaker
66 Concord Street
Wilmington, MA 01887

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

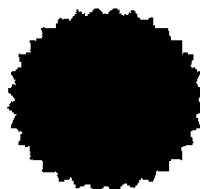
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OMNISONICS MEDICAL TECHNOLOGIES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3223506 8300
060169500



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 4541580

DATE: 02-22-06

Division of Corporations

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Division of Corporations
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Account Name : FISHER, TOUSEY, LEAS & BALL
Account Number : I19990000021
Phone : (904) 356-2600
Fax Number : (904) 355-0233RECEIVED
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TALLAHASSEE, FLORIDA

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