

F06000003358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

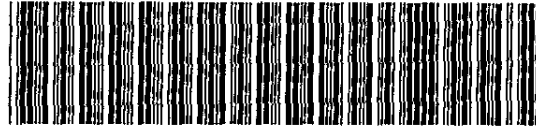
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/09/06--01011--017 **70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.F. 5-9

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Medical News Papers, 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:

Christine Medeiros

(Name of Person)

Medical News Papers, Inc.

(Firm/Company)

5123 Virginia Way Ste. A-23

(Address)

Brentwood, TN 37027

(City/State and Zip code)

For further information concerning this matter, please call:

Christine Medeiros

(Name of Person)

at (615) 385-4421 x201

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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. Medical News Papers, 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. Tennessee

71-0873033

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

(FEI number, if applicable)

4. 10/01/2002

(Date of incorporation)

perpetual

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

6. February 2006

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

7. 5123 Virginia Way A-23 Brentwood, TN. 37027

(Principal office address)

same

(Current mailing address)

8. Publishers of a medical format newspaper. Tampa Bay Medical News.

(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: David C. Wilson

Office Address: 15814 Spring Crest Circle

Tampa

(City)

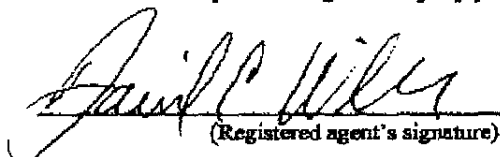
Florida 33624

(Zip code)

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TALLAHASSEE, FLORIDA

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:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Mac Hardcastle

Address: 5123 Virginia Way A-23
Brentwood, TN 37027

Vice President: _____

Address: _____

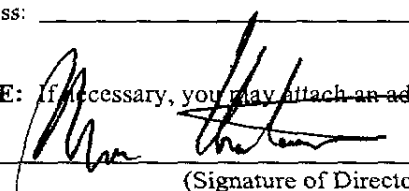
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. Mac Hardcastle President
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 04/27/2006
REQUEST NUMBER: 06117521
TELEPHONE CONTACT: (615) 741-6488
CHARTER/QUALIFICATION DATE: 10/01/2002
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0434280
JURISDICTION: TENNESSEE

TO:
MAC HARDCASTLE
5123 VIRGINIA WAY
A-23
BRENTWOOD, TN 37027

REQUESTED BY:
MAC HARDCASTLE
5123 VIRGINIA WAY
A-23
BRENTWOOD, TN 37027

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"MEDICAL NEWS PAPERS, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS NOT BEEN FILED
WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

FOR: REQUEST FOR CERTIFICATE

ON DATE: 04/27/06

FROM:
MEDICAL NEWS PAPERS, INC
123 VIRGINIA WAY
TE A-23
BRENTWOOD, TN 37027-0000

	FEES	
RECEIVED:	\$60.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$60.00
RECEIPT NUMBER:	00003933843	
ACCOUNT NUMBER:	00406598	



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE