F060005259

(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
 (Bu	siness Entity Nam	ne)
(Do	ocument Number)	····
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
		,

Office Use Only



300078162563

RECEIVED

06 AUG 10 AM 10: 1.1

FILED

66 AUG 10 PM 12: 57

814



APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA FOCUS CARE, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc ," "Co.," "Corp," "Inc," "Co," or "Corp ") tocus Care Inc aba Focus Care Health Care Staffing Solutions (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) **MASSACHUSETTS** (State or country under the law of which it is incorporated) APRIL, 04 2002 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") Vone (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 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) Corporation Service Company Name: 1201 Hays Street

10. Registered agent's acceptance:

Tallahassee

(City)

Office Address:

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.

_, Florida 32301 (Zip code)

(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:

12. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: None Chairman:
A. DIRECTORS
A. DIRECTORS Chairman: None Chairman:
Address:
1104
Vice Chairman: None
Address:
Director: Vone
Address:
Director: None
Address:
B. OFFICERS
President: Annul Buleh
Address: // Foster Cincle
Reading MA 01867
Address:
Secretary:
• -
Address:
Treasurer: None
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
1. X Ang 8 R M
(Signature of Director or Officer listed in number 12 of the application)
14. X ANINUDU BAHETI President (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)



The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

August 4, 2006

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

FOCUS CARE, INC.

is a domestic corporation organized on **April 4**, **2002**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.





In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Travino Galecin

Secretary of the Commonwealth

Processed By: jbm