Foboooologlo

(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:	\neg

Office Use Only

524-4099 wdo-51767



300081803303

11/28/06--01063--015 **78.75

CARTAIL OF STATE

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

RECEIVED
DEPARTMENT OF STATE
VISION OF CORPORATION

apple 12



FILED

UĐ	MOA	20	AM	11:	2.

ACCOUNT NO. : 072100000032

SECRETARY OF STATE REFERENCE: 621256 5059360LAHASSEE, FLORIDA

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE: November 27, 2006

ORDER TIME : 10:50 AM

ORDER NO. : 621256-005

CUSTOMER NO: 5059360

FOREIGN FILINGS

NAME: LIFESOURCE

XXXX QUALIFICATION (TYPE: NP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER: ____



FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED

06 NOV 28 AN II: 55

SECRETANY OF STATE TALLAHASSEE, FLORIDA

December 1, 2006

CSC NETWORKS ATTN: LORI 1201 HAYS STREET TALLAHASSEE, FL 32301 RESUBMIT

Please give original submission date as file date.

SUBJECT: LIFESOURCE CORPORATION

Ref. Number: W06000051767

We have received your document for LIFESOURCE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The date of incorporation on the application must match the date on the certificate.

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, and Inc.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2007 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please cal (850) 245-6973.

Claretha Golden Document Specialist New Filing Section

Letter Number: 606A00069221

RECEIVED

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE 3 NOV 28 MI II: 55

November 29, 2006

CSC NETWORKS ATTN: LORI 1201 HAYS STREET TALLAHASSEE, FL 32301

SUBJECT: LIFESOURCE CORPORATION

Ref. Number: W06000051767

RESUBMIT

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Please give original submission date as file date.

We have received your document for LIFESOURCE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The date of incorporation on the application must match the date on the certificate.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden Document Specialist New Filing Section

Letter Number: 106A00068740

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned	John N. Davis (Nam		, do	hereby certify
that this Resolution of th	ne Board of Directors of	LifeSource		
	· (Corporate	: Name)		
a corporation duly organ	ized and existing under the	laws of the State of _	Illinois	
was duly adopted on		Dece	ember 7	, 2006
Be it resolved, that	LifeSource	,		1
	•	(Corporate Name)		
organized and existing in	the State of Illinois	.,	_ , hereby ado	pts the name
LifeSource Blood Ser	vices Corporation		for u	ıse in Florida.
Dated: 12/7/0	6			
, •	Signature of either Chair	man, Vice Chairman o	r any officer	
	John N. Davis, Tre		•	
		or print name .		EE, FLORI

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

Life Source Conponation (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)				
(State or country under the law of which it is incorporated) 3. 36-3492969 (FEI number, if applicable) Thread 13 1987 5. Perpetual				
Date of Incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") NA (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty liability.)				
1205 N. Milwaukee Ave. Glenview, IL 60025 (Principal office address)				
1205 N. Milwaukece Ave., Glenview, 120025				
Promote public participation in the blood program assuring an 8. adequate 4 safe blood supply to members of the community in need (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)				
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Corporation Service Coupany ffice Address: 1201 Hays Strongt Tallahassee Florida 32305 (City) Florida 33305				
Name: Corporation Service Coupany				
ffice Address: 1201 Hays Stroot				
Tallahassee Florida 38305 = 5				
0. Registered agent's acceptance: Taving been named as registered agent and to accept service of process for the above stated corporation at the place esignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I wither 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.				

Amanda Haddan as its 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 addresses of officers and/or directors:

A. DIRECTURS	
Chairman: Michael H. Jones	6 William H. Partman
Address: 1205 N. Milwaukee Auc.	1205 N. Milwaukee Ave.
Glenview, 11 60025	Glenview, 1260025
Vice Chairman: Gerald Ropes	
Address: 1205 N. Milwaukee Ave.	
Glenview, 11 60025	
Director: @ RUSSELL E. FEURCE	@ Farrell Rubenstein
Address: 1205 N. Milwaukee Auc.	1205 N. Milwaukee Ave.
Glenview, 12.60025	Glenview, 11 60025
Director: Christopher D. Murtaugh	Maile Winograd
Address: 1205 N. Milwaukee Ave.	1205 N. Milwaukee Ave,
Glenview, 12 60025	Glenview, 1L 60025
B. OFFICERS	,
President: William H. Portman	@ Gerald Roper-
Address: 1205 N. Milwaukee Ave.	1205 N. Milwaukee Ave
Glenview, IL 60025	Glenview, IL 60025
Vice President:	6 Michael H. Jones
Address:	1205 N. Milwaukee Auc.
	Glenview, 12 60025
Secretary: Patricia Best	SED SED
Address: 1205 N. Milwaukee Ave.	AE 8 7
Treasurer 3 John 10. Davis	SSE 28
Address: 1205 N. Milwaukee Aue. Glenview, IL 60025	= 0
,	INTE ORIDA
NOTE: If necessary, you may attach an addendum to the applicant	
(Signature of Chairman, Vice Chairman, or any officer	r listed in number 12 of the application)
14. Join N DAVIS - TREASU (Typed or printed name and capacity of	erson signing application)

File Number

5451-625-8



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

LIFESOURCE, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 13, 1987, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 0633102070

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 27TH

day of NC

NOVEMBER

A.D.

2006

Desse White

SECRETARY OF STATE