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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

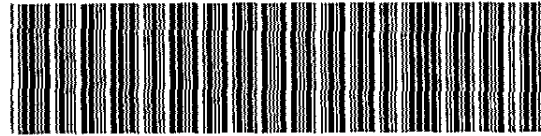
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/02/07--01016--004 **78.75

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2007 OCT -2 PM 2:41

CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

CL 10-3

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Aurora Imaging Technology, 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:

Lisa M. DiMare

(Name of Person)

Aurora Imaging Technology, Inc.

(Firm/Company)

39 High Street

(Address)

North Andover, MA 01845

(City/State and Zip code)

For further information concerning this matter, please call:

Lisa M. DiMare

(Name of Person)

at (978) 975-7530 x4344

(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. Aurora Imaging Technology, Inc.

(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. 04-3461782

(FEI number, if applicable)

4. 4/21/1999

(Date of incorporation)

5. perpetual

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

6. _____

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

7. 39 High Street, N. Andover, MA 01845

(Principal office address)

39 High Street, N. Andover, MA 01845

(Current mailing address)

8. Women's health center with dedicated breast MRI

(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.

Amy P. Blith

(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.

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2007 OCT -2 PM 2:41
TALLAHASSEE, FLORIDA

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2007 OCT -2 PM 2:41
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Gordon M. Olsen

Address: 39 High Street, N. Andover, MA 01845

Vice Chairman: _____

Address: _____

Director: Olivia Ho Cheng

Address: 39 High Street, N. Andover, MA 01845

Director: Michael Devlin

Address: 39 High Street, N. Andover, MA 01845

B. OFFICERS

President: Olivia Ho Cheng

Address: 39 High Street, N. Andover, MA 01845

Vice President: Steven J. James, CFO

Address: 39 High Street, N. Andover, MA 01845

Secretary: A. Bruce Bowden

Address: 39 High Street, N. Andover, MA 01845

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. Steven J. James, CFO & EVP

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

FILED

2007 OCT -2 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "AURORA IMAGING TECHNOLOGY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-FIRST DAY OF APRIL, A.D. 1999, AT 9:45 O'CLOCK A.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "MRI ACQUISITION CORPORATION" TO "AURORA IMAGING TECHNOLOGY, INC.", FILED THE SEVENTH DAY OF JUNE, A.D. 1999, AT 12:01 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, FILED THE THIRTEENTH DAY OF JULY, A.D. 1999, AT 3:30 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, FILED THE TWENTY-THIRD DAY OF JUNE, A.D. 2000, AT 4:30 O'CLOCK P.M.

RESTATED CERTIFICATE, FILED THE EIGHTEENTH DAY OF JUNE, A.D. 2002, AT 4:30 O'CLOCK P.M.

CERTIFICATE OF DESIGNATION, FILED THE SEVENTEENTH DAY OF



3032386 8310

071053123

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6030099

DATE: 09-26-07

Delaware

PAGE 2

The First State

SEPTEMBER, A.D. 2004, AT 1:54 O'CLOCK P.M.

RESTATED CERTIFICATE, FILED THE TWENTY-FIRST DAY OF
DECEMBER, A.D. 2004, AT 4:25 O'CLOCK P.M.

CERTIFICATE OF CHANGE OF REGISTERED AGENT, FILED THE
TWENTY-NINTH DAY OF DECEMBER, A.D. 2004, AT 11:47 O'CLOCK A.M.

RESTATED CERTIFICATE, FILED THE FIFTH DAY OF MAY, A.D. 2006,
AT 12:24 O'CLOCK P.M.

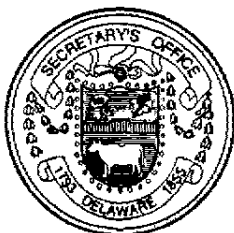
AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID
CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE
AFORESAID CORPORATION, "AURORA IMAGING TECHNOLOGY, INC.".

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

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

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6030099

DATE: 09-26-07