

FD7000005839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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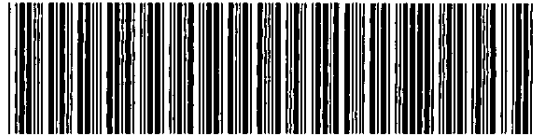
(Business Entity Name)

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TALLAHASSEE, FLORIDA

1/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: EPIC SYSTEMS CORPORATION
(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:

ROBERT FAHRENBACH

(Name of Person)

EPIC SYSTEMS CORPORATION

(Firm/Company)

1979 MILKY WAY

(Address)

VERONA, WI 53593

(City/State and Zip code)

For further information concerning this matter, please call:

KIRK MATTHEWSON

(Name of Person)

at (608) 410-5121

(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

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EPIC SYSTEMS

PAGE 02/02

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. EPIC SYSTEMS CORPORATION

(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. WISCONSIN

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

3. 39-139950

(FEI number, if applicable)

4. 2/1/1979

(Date of incorporation)

5. PERPETUAL

(Duration: Your 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. 1979 MILKY WAY, VERONA, WI 53593

(Principal office address)

1979 MILKY WAY, VERONA, WI 53593

(Current mailing address)

8. CUSTOM SOFTWARE SALES

(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: NRAI Services, Inc.

Office Address: 2731 EXECUTIVE PARK DRIVE, SUITE 4

WESTON

(City)

Florida 33331

(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.

NRAI Services, Inc.

Guam M. Howarth, Asst Secy
(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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ALABAMA, FLORIDA

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

A. DIRECTORS

Chairman: See attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See attached

Address: _____

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. Ken Hansen

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

14. KENNETH HANSEN - CORPORATE SECRETARY

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

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

Board of Directors

Roger Hauck
3512 Blackhawk Drive
Madison, WI 53705

Leonard Mattioli
5025 Tonyawatha Trail
Monona, WI 53716

Marjorie Greenfield
47 Mayfair Drive
Rancho Mirage, CA 92270

Nicholas Seay
8910 Settlers Road
Madison, WI 53717

Judith Faulkner - Chairman
3033 Irvington Way
Madison, WI 53713

Carl Dvorak
9113 Aspen Grove Lane
Madison, WI 53717

Andrew M Giesler
21 Apple Hill Circle
Madison, WI 53717

Officers

Judith Faulkner - President
3033 Irvington Way
Madison, WI 53713

Carl Dvorak – Executive Vice President
9113 Aspen Grove Lane
Madison, WI 53717

Dave Hall - Vice President
5919 Woods Edge Road
Madison, WI 53711

Ken Hansen – Secretary
5837 Scarlet Lane
Madison, WI 53711

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

EPIC SYSTEMS CORPORATION

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is February 1, 1979.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.

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TALLAHASSEE, FLORIDA



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on November 16, 2007.

A handwritten signature of Ray Allen.

RAY ALLEN, Deputy Administrator
Division Of Corporate & Consumer Services
Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: **46241-7AD7F20E**