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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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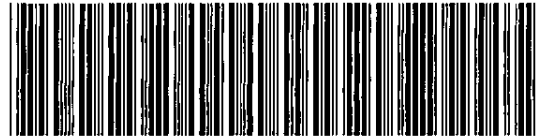
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
AND
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 OCT - 6 AM 11:23

B. McKnight OCT 07 2008

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Dynamic Medical Systems, 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:

Vanessa Jones

(Name of Person)

Dynamic Medical Systems, Inc.

(Firm/Company)

2811 E Ana Street

(Address)

Rancho Dominguez, CA

90221

(City/State and Zip code)

For further information concerning this matter, please call:

Vanessa Jones

(Name of Person)

at (800) 225-9080 x259

(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. Dynamic Medical Systems, 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. Nevada

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

3. 88-0346211

(FEI number, if applicable)

4. 08/04/1995

(Date of incorporation)

5. perpetual

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

6. N/A

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

7. 2811 E Ana Street, Rancho Dominguez, CA 90221

(Principal office address)

2811 E Ana Street, Rancho Dominguez, CA 90221

(Current mailing address)

8. Rental of therapy mattresses to SNFs for patients with wounds

(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 Dr, Ste 4

Weston, Florida 33331

(City)

(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.

By: Amy Purdy

7/6/08

Amy Purdy, Assistant Secretary

(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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Dave Robertson

Address: 2811 E Ana Street, Rancho Dominguez, CA 90221

Director: Greg Apostolou

Address: 2811 E Ana St. Rancho Dominguez, CA 90221

B. OFFICERS

President: Greg Apostolou

Address: 2811 E Ana St. Rancho Dominguez, CA 90221

Vice President: _____

Address: _____

Secretary: Dave Robertson

Address: 2811 E Ana St. Rancho Dominguez, CA 90221

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. Greg Apostolou Pres., CFO

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

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AND
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

SECRETARY OF STATE



08 OCT -6 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DYNAMIC MEDICAL SYSTEMS, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 4, 1995, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on July 28, 2008.

A handwritten signature of Ross Miller in black ink.

ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20080728-1074
You may verify this electronic certificate
online at <http://www.nvsos.gov/>