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Florida Department of State

Division of Corporations Public Access System

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: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

FOREIGN PROFIT/NONPROFIT CORPORATION

HBE Corporation d/b/a Hospital Building & Equipment Company

Certificate of Status	0
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TEHMALE MAK TO SALE

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLOREDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF PLORIDA.

•	lable in Florida, enter alternate corporate n	ame adopted for the purpose of transacting busin	iess in Florida)
State or country	under the law of which it is Incorporated)	3. 26-3942754 (FEI number, if applicable)	
	12/3-/2008		
01/02/2009 (Date	of incorporation)	5. Perpetual (Duration: Year corp. will cease to exist to	r "perpetual")
		ess in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 69	07.1502, F.S., to determine penalty liability)	
11330 Olive BI	vd., Creve Coour, MO 63141 (Principal office	and ones	
	(Trincipal Cirios	s admest)	
Same	(Current mailing	address)	
_	• ••		
	dial construction on a design	m / build model.	<u> </u>
(Purpose(s) of corporation authorized in home state	or country to be carried out in state of Florida)	بال 2 2 2
(Purpose(ECRE
(Purpose)	et address of Florida registered agent:		ECRETAR
(Purpose(ARY SSEE
Name and stro	et address of Florida registered agent:		ECRETARY OF S
Name and stro	et address of Florida registered agent: C T Comoration System		ARY SSEE

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: A. DIRECTORS Chairman: ___ See Attached Address: ___ Vice Chairman: Address: _ Director: Address: ___ Director: _ Address: **B. OFFICERS** President: Address: See Attached Vice President: __ Address: ___ Secretary: Address: _ Treasurer: Address: _ NOTE: Ill necessary, you may attachen addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

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

14, Fred S. Kummer, President

HBE Corporation

Officers:

Fred Strange Kummer, President 11330 Olive Blvd., St. Louis, MO 63141

June Marie Kummer, Vice President/Assistant Secretary 11330 Olive Blvd., St. Louis, MO 63141

Douglas James Adrian, Treasurer 11330 Olive Blvd., St. Louis, MO 63141

Jeffrey Paul Karandjeff, Secretary 11330 Olive Blvd., St. Louis, MO 63141

Directors:

Fred Strange Kummer, Director 11330 Olive Blvd., St. Louis, MO 63141

June Marie Kummer, Director 11330 Olive Blvd., St. Louis, MO 63141

Douglas James Adrian, Director 11330 Olive Blvd., St. Louis, MO 63141

Jeffrey Paul Karandjeff, Director 11330 Olive Blvd., St. Louis, MO 63141

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HBE CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

4630469 8300

090073331

You may verify this certificate online

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 7102678

DATE: 01-27-09