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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	
Special Instructions to Filing Officer:	

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TALLAHASSEE. FLORIDA

EP 7/8/09

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: IV Nurses Group, Inc.	
	ı - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," and check are submitted to stransact business in Florida.	Authorization to Transact Business in Florida," register the above referenced foreign corporation to
Please return all correspondence concerning this matter	to the following:
Patsy A. le	ezzi, Jr.
Name of	Person
lezzi L	.aw
Firm/Con	npany
140 South Main St	treet, Suite 201
Addr	CSS
Greensburg.	PA 15601
City/State a	nd Zip code
info@lezzil	
E-mail address: (to be used t	for future annual report notification)
For further information concerning this matter, please of	all:
Cynthia Kobaly at (724	322-9818
Name of Person 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, PL 32314
Enclosed is a check for the following amount:	
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

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.

	io	ame	adopted for the purpose of transacting business in Florida)
Pervisylvan	under the law of which it is incorporated)	_ 3.	(FEI number, if applicable)
November 6	_	_	perpetual
	of incorporation)	۵.	(Duration: Year corp. will cease to exist of "perpetual")
	•		
			Plorida, if prior to registration)
		7.15	02, F.S., to determine penalty liability)
1337 Willow			Σ σ
	(Principal office	9 4 (7)	(655)
Bell Vernon,	PA 15012 (Current mailing	. 4 1	
At home IV	. ·		SEE
(Ригрозе):) of corporation authorized in home state o	r co	untry to be carried out in state of Florida)
Name and street	v. address of Florida registered agem: (P.O	Box NOT acceptable)
Name:	National Registered Agents, In	1C.	· ·
ffice Address:	2731 Executive Park Drive, Su	iite	4
	Weston		, Florida 33331
	(City)		(Zip code)

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 Chainnan: __ Address: Vice Chairman: Address: _ Director: Eileen Critchfield Address: 1036 Mace Street Greensburg, PA 15601 Director. Cynthia Kobaly Address: 1337 Willobrook Road Bell Vernon, PA 15012 B. OFFICERS President: Eileen Critchfield Address: 1036 Mace Street Greensburg, PA 15601 Vice President: _ Address: Secretary: Cynthia Kobaly Address: 1337 Willowbrook Road Bell Vernon, PA 15012 Treasurer: Cynthia Kobaly Address: 1337 Willowbrook Road Bell Vernon, PA 15012 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director of Officer listed in number 12 of the application) 14. Eileen Critchfield, President (

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

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

JUNE 1, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

IV NURSES GROUP, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth



140 SOUTH MAIN STREET • SUITE 201 • GREENSBURG, PENNSYLVANIA 15601

TELEPHONE: 724.832.7171 • FAX: 724.832.7456

EMAIL: INFO@IEZZILAW.COM • WEBSITE: WWW.IEZZILAW.COM

July 2, 2009

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

IN RE: IV Nurses Group, Inc.

Dear Sir or Madam:

Please find enclosed a completed Application by Foreign Corporation for Authorization to Transact Business in Florida for IV Nurses Group, Inc., a Certificate of Existence, and a check for \$70.00, made payable to the Department of State.

Should you have any questions or need any additional information, please do not hesitate to contact my assistant, Justine, or me.

Very truly yours,

Patsy A. lezzi, Jr.

JL

CC: Ms. Cynthia Kobaly Mrs. Eileen Critchfield

Enclosures:

Application for Authorization to Transact Business

Certificate of Existence/Good Standing

Cover Letter Check

IRS CIRCULAR 230 DISCLOSURE:

To ensure compliance with requirements imposed by the IRS, we inform you that any U.S. tax advice contained in this communication (including any attachments) is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing or recommending to another party any transaction or matter addressed herein.