

F09000003025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600157052586

06/12/09--01034--006 **78.75

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09 JUL 28 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 7/29/09

1.109000027804



RECEIVED
DEPARTMENT OF STATE

09 JUL 17 PM 4:38

FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2009

ATHANASIOUS C. SALINS
1151 NORTH FORT LAUDERDALE BEACH BLVD, #1
FORT LAUDERDALE, FL 33304

SUBJECT: FIRST MEDICAL SOLUTIONS CORPORATION
Ref. Number: W09000027806

We have received your document for FIRST MEDICAL SOLUTIONS CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6062.

Eula Peterson
Regulatory Specialist II

Letter Number: 309A00020103



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 20, 2009

ATHANASIOUS C. SALINS
1151 NORTH FORT LAUDERDALE BEACH BLVD, #1
FORT LAUDERDALE, FL 33304

SUBJECT: FIRST MEDICAL SOLUTIONS CORPORATION
Ref. Number: W09000027806

We have received your document for FIRST MEDICAL SOLUTIONS CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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Eula Peterson
Regulatory Specialist II

Letter Number: 309A00020103

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DIVISION OF CORPORATION

RECEIVED

COVER LETTER

09 JUL 28 PM 2:44

DIVISION OF CORPORATION

TO: New Filing Section
Division of Corporations

SUBJECT: First Medical Solutions 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:

Athanasious Chris Salins

Name of Person

First Medical Solutions Corporation

Firm/Company

1151 North Fort Lauderdale Beach Blvd, Suite 10D

Address

Fort Lauderdale, Florida 33304

City/State and Zip code

Chris.Salins@FirstMedicalSolutions.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Athanasious Salins

Name of Person

at (954) 214-1721

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. First Medical Solutions 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. Nevada

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

3. 26 165 3029

(FEI number, if applicable)

4. 11/14/07

(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. 1151 North Fort Lauderdale Beach Blvd, Suite 10D, Fort Lauderdale, FL 33304

(Principal office address)

1151 North Fort Lauderdale Beach Blvd, Suite 10D, Fort Lauderdale, FL 33304

(Current mailing address)

8. Healthcare Informatics

(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: **Chris Salins**

Office Address: **1151 North Fort Lauderdale Beach Blvd, S**

Fort Lauderdale, Florida **33304**

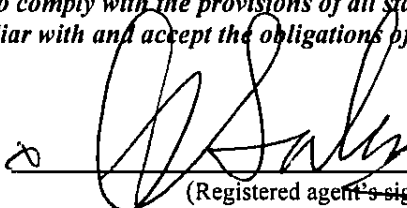
(City)

(Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(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.

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

A. DIRECTORS

Chairman: Athansious Christopher Salins

Address: 1151 North Fort Lauderdale Beach Blvd, Suite 10D, Fort Lauderdale, FI 33304

Vice Chairman: Denis Salins

Address: 1151 North Fort Lauderdale Beach Blvd, Suite 10D, Fort Lauderdale, FI 33304

Director: _____

Address: _____

Director: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

B. OFFICERS

President: Athansious Christopher Salins

Address: 1151 North Fort Lauderdale Beach Blvd, Suite 10D, Fort Lauderdale, FI 33304

Vice President: Denis Salins

Address: 1151 North Fort Lauderdale Beach Blvd, Suite 10D, Fort Lauderdale, FI 33304

Secretary: _____

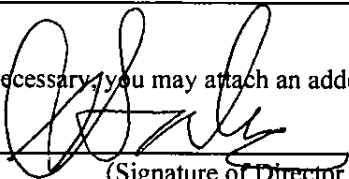
Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 20



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

14. Athansious Christopher Salins

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

SECRETARY OF STATE



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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, **FIRST MEDICAL SOLUTIONS CORPORATION**, 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 November 14, 2007, 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 24, 2009.

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20090724-0456
You may verify this electronic certificate
online at <http://www.nvsos.gov/>