

F10000003621

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

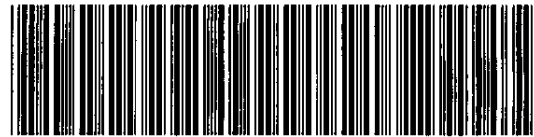
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/10/10--01010--006 **\$7.50

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

*MRP
8/12*

CELTIC

Celtic Insurance Company

Sears Tower
233 South Wacker Drive, Suite 700
Chicago, Illinois 60606-6393
312-332-5401

August 9, 2010

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Application By Foreign Corporation For Authorization To Transact
Business In Florida**

Dear Sirs:

Enclosed for your review and approval is an application for Application By Foreign Corporation For Authorization To Transact Business In Florida for NovaSys Health, Inc..

We have also enclosed a check in the amount of \$ 87.50 representing the filing fee. We have also included our Federal Express billing number of 419923745, so the approved certificate may be overnighted to my attention.

Thank you for your time, assistance and consideration with this application. If you have any questions or require additional information regarding this submission, please feel free to contact me at (312) 332-8331.

Sincerely,

CELTIC INSURANCE COMPANY



Juan J. Guerra, HIA
Senior Contract Analyst

Enclosure

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: NovaSys Health, 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," or "Certificate of Good Standing" 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:

Juan J. Guerra

Name of Person

Celtic Insurance Company

Firm/Company

Sears Tower, 233 South Wacker Drive, Suite 700

Address

Chicago, IL 60606

City/State and Zip code

jguerra @celtic-net.com

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

For further information concerning this matter, please call:

Juan J. Guerra

at (312) 332-8331

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, FL 32314

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input checked="" type="checkbox"/> \$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. NovaSys Health, 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. Delaware

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

3. 27-2221367

(FEI number, if applicable)

4. March 24, 2010

(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. 10801 Executive Center Drive, Suite 100, Little Rock, AR 72211

(Principal office address)

Same as Above

(Current mailing address)

8. Third Party Administrator

(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: C T Corporation System

Office Address: 1200 South Pine Island Road, C/O C T Corporation System

Plantation, Florida 33324

(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.

See sheet attached

(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCEPTANCE OF APPOINTMENT

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10 AUG 10 PM 1:51

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

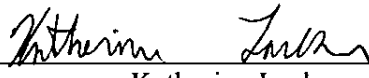
RE: NovaSys Health, Inc.

Pursuant to Sections 48.091 and 607.0501, Florida Statutes, the undersigned acknowledges and accepts its appointment as registered agent of the above corporation and agrees to act in the capacity and to comply with the provisions of the Florida Business Corporation Act (1990) relative to keeping open the registered office at the address specified above. The undersigned is familiar with, and accepts the obligations of, Section 607.0505, Florida Statutes.

Dated: July 30, 2010

C T CORPORATION SYSTEM

By



Katherine Lackey,
Assistant Secretary

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TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: Jesse N. Hunter

Address: 7711 Carondelet Avenue

St. Louis, MO 63105

Vice Chairman: _____

Address: _____

Director: William N. Scheffel

Address: 7711 Carondelet Avenue

St. Louis, MO 63105

Director: Keith H. Williamson

Address: 7711 Carondelet Avenue

St. Louis, MO 63105

B. OFFICERS

President: John P. Ryan

Address: 10801 Executive Center Drive, Suite 100

Little Rock, AR 72211

Vice President: William N. Scheffel

Address: 7711 Carondelet Avenue

7711 Carondelet Avenue

Secretary: Keith H. Williamson

Address: 7711 Carondelet Avenue, St. Louis, MO 63105

Treasurer: Jeffrey Schwanake

Address: 7711 Carondelet Avenue, St. Louis, MO 63105

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

13. _____

Keith H. Williamson

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

14. Keith H. Williamson, Director/Secretary

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

Delaware

The First State

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SECRETARY OF STATE
TALLAHASSEE FLORIDA


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOVASYS HEALTH, INC." 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 THIRTIETH DAY OF JULY, A.D. 2010.

4803681 8300

100787667

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8145372

DATE: 07-30-10