

00-20-210 14/4 MACFARLANE FERGUSON 727-442-8470 P.01/06  
F10000004635

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000227912 3)))



H100002279123ABCY

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN (CLEARWATER)  
Account Number : 071005001001  
Phone : (727)441-8966  
Fax Number : (727)442-8470

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ecm@macfar.com

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**PARKVIEW EMERGENCY MEDICAL SERVICES LIMITED INC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

2010 OCT 20 PM 2:19

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

10 OCT 20 PM 4:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

10/21/10

OCT-20-2010 14:25

MACFARLANE FERGUSON

727 442 8470 P.02/06

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2010 OCT 20 PM 2:19



October 19, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

MACFARLANE FERGUSON & MCMULLEN

SUBJECT: PARKVIEW EMERGENCY MEDICAL SERVICES LIMITED  
REF: W10000049079

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

If you have any further questions concerning your document, please call (850) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H10000227912  
Letter Number: 310A00024704

\*\*\*NOTE: PLEASE SEE NOTE \*\* ON THE FIRST PAGE OF THE APPLICATION STATING: IN CANADA THE SUFFIX "LIMITED" IS USED TO INDICATE THE ENTITY IS A CORPORATION.

\*\*\*AS REQUESTED, INC HAS BEEN ADDED TO THE END OF THE NAME. IF YOU NEED ANYTHING ELSE, PLEASE ADVISE. THANK YOU.\*\*\*

H100002279123

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** PARKVIEW EMERGENCY MEDICAL SERVICES LIMITED 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:

EMIL C. MARQUARDT, JR., ESQ.

Name of Person

MACFARLANE FERGUSON & MCMULLEN

Firm/Company

625 COURT STREET, SUITE 200

Address

CLEARWATER, FL 33756

City/State and Zip code

ecm@macfar.com

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

For further information concerning this matter, please call:

Emil C. Marquardt, Jr.

Name of Person

at ( 727 ) 444-1402

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

H100002279123

2010 OCT 20 PM 2:19

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

H100002279123

**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. PARKVIEW EMERGENCY MEDICAL SERVICES LIMITED INC**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"

"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp."\*\*IN CANADA THE SUFFIX "LIMITED" IS USED TO INDICATE THE  
ENTITY IS A CORPORATION.\*\*

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. ONTARIO, CANADA**

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

**3. ONTARIO CORPORATION #1085877**

(FBI number, if applicable)

**4. November 7, 1994**

(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. 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2**

(Principal office address)

**11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2**

(Current mailing address)

**8. MEDICAL AIRFLIGHTS**

(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: **EMIL C. MARQUARDT, JR., ESQ.**

Office Address: **625 Court Street, Ste. 200**

**Clearwater**

(City)

**Florida 33756**

(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.*

(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.**

H100002279123

FILED  
SECRETARY OF STATE  
DIVISION OF CORRECTIONS  
H100002279123

2010 OCT 20 PM 2:19

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

## A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: JAMES DOYLEAddress: 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2Director: GRAHAM MITCHELLAddress: 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2

## B. OFFICERS

President: JAMES DOYLEAddress: 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2Vice President: GRAHAM MITCHELLAddress: 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2Secretary: GRAHAM MITCHELLAddress: 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2Treasurer: GRAHAM MITCHELLAddress: 11 ZINA STREET, ORANGEVILLE, ONTARIO L9W 1E2

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

13. [Signature] [Signature]  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, P.S.

14. James Doyle - President GRAHAM MITCHELL VICE PRESIDENT  
(Typed or printed name and capacity of person signing application)

H100002279123

H100002279123

Request ID: 012600181  
Demande n°:  
Transaction ID: 42573861  
Transaction n°:  
Category ID: CT  
Catégorie:

Province of Ontario  
Province de l'Ontario  
Ministry of Government Services  
Ministère des Services gouvernementaux

Date Report Produced: 2010/10/19  
Document produit le:  
Time Report Produced: 10:08:25  
Imprimé à:

## CERTIFICATE OF STATUS ATTESTATION DU STATUT JURIDIQUE

This is to certify that according to the  
records of the Ministry of Government  
Services

D'après les dossiers du Ministère des  
Services gouvernementaux, nous attestons  
que la société

### PARKVIEW EMERGENCY MEDICAL SERVICES LIMITED

Ontario Corporation Number

Numéro matricule de la société (Ontario)

001085877

is a corporation incorporated,  
amalgamated or continued under  
the laws of the Province of Ontario.

est une société constituée, prorogée ou née  
d'une fusion aux termes des lois de la  
Province de l'Ontario.

The corporation came into existence on

La société a été fondée le

NOVEMBER 07 NOVEMBRE, 1994

and has not been dissolved.

et n'est pas dissoute.

Dated

Fait le

OCTOBER 18 OCTOBRE, 2010



Director  
Directrice

The issuance of this certificate in electronic form is authorized by the Ministry of Government Services.  
La délivrance du présent certificat sous forme électronique est autorisée par le Ministère des Services gouvernementaux.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2010 OCT 20 PM 2:19

H100002279123