

F11000001312

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.

((H11000078442 3)))



H110000784423ABC.

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

FILED

2011 MAR 24 PM 4:41

RE-SUBMIT

Please retain original filing
date of submission 3/24

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

From:
Account Name : C T CORPORATION
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
ONSite Services Co. d/b/a OS Services of Florida Co.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED

11 MAR 25 PM 2:22

FLORIDA DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

T. Burch MAR 28 2011



March 25, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: OS SERVICES OF FLORIDA CO.
REF: W11000016902

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.

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.

If you have any further questions concerning your document, please call (850) 245-6901.

Pamela Smith
Regulatory Specialist II
New Filing Section

FAX Aud. #: E11000078442
Letter Number: 811A00007280

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. Q-Site Services Co.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

2. Delaware 3. 27-3758329
(State or country under the law of which it is incorporated) (PEI number, if applicable)

4. 10/25/2010 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1660 Research Drive, Suite 250, Troy, MI 48083
(Principal office address)

8. None
(Current mailing address)

9. Provider of medical instrument management and repair services
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

10. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: C T Corporation Systems
Office Address: 1200 South Pine Island Road
Plantation , Florida 33324
(City) (Zip code)

11. 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.

By: C T Corporation Systems
James Hulpin, Asst. Sec.
(Registered agent's signature)

12. 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.

卷之四

卷之三

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

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. F-76 **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 18 U.S.C. 1546, 1546a.

14. Brian Bagland, Secretary
(Typed or printed name and capacity of person signing application)

FILED

2011 MAR 24 PM 4:41

DEPARTMENT OF STATE
DIVISION OF SECRETARY
OF STATE

Attachment to Florida
Officers & Directors

1	Full Name:	Dennis Stroppa
	Officer/Director:	Officer
	Officer's Title:	CBO and President
	Director's Title:	
	Business Address:	1650 Research Drive, Suite 250
	City:	Troy
	State:	MI
	ZIP Code:	48083
2	Full Name:	Brian England
	Officer/Director:	Officer
	Officer's Title:	CFO, Treasurer and Secretary
	Director's Title:	
	Business Address:	1650 Research Drive, Suite 250
	City:	Troy
	State:	MI
	ZIP Code:	48083
3	Full Name:	Thomas Hodge
	Officer/Director:	Officer, Director
	Officer's Title:	Vice President and Assistant Secretary
	Director's Title:	Director
	Business Address:	1650 Research Drive, Suite 250
	City:	Troy
	State:	MI
	ZIP Code:	48083
4	Full Name:	Steven Bailey
	Officer/Director:	Director
	Officer's Title:	
	Director's Title:	Director
	Business Address:	1650 Research Drive, Suite 250
	City:	Troy
	State:	MI
	ZIP Code:	48083
5	Full Name:	Benjamin Magnano

Officer/Director: Director
Officer's Title: Director
Director's Title: Director
Business Address: 1650 Research Drive, Suite 250
City: Troy
State: MI
ZIP Code: 48083

2011 MAR 24 PM 4:41

SEARCHED
INDEXED
SERIALIZED
FILED
FBI - DETROIT

FBI - D

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ONSITE SERVICES CO." 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-FOURTH DAY OF MARCH, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

FILED

2011 MAR 24 PM 4:41

SECRETARY OF STATE
DEPARTMENT OF STATE
STATE OF DELAWARE

4889368 8300

110335062

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



Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8645872

DATE: 03-24-11