

F110000002671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

CC
Amend Affidavit
to chg Off/Dlr
@ 10/14/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CoreTherm Medical Inc.
Name of Corporation

DOCUMENT NUMBER: F11000002671

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Svein Leithe

Name of Contact Person

CoreTherm Medical Inc.

Firm/Company

120 Commerce Blvd, Suite 5

Address

Oldsmar, FL 34677

City/State and Zip Code

svein.leithe@coretherm.com

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

For further information concerning this matter, please call:

Svein Leithe

Name of Contact Person

at (800) 395-1575

Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

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\$35.00 Filing Fee

☐

\$43.75 Filing Fee &
Certificate of Status

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\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐

\$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:

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

Street Address:

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



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 13 AM 8:51

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:
CoreTherm Medical Inc.
2. This entity was authorized to transact business in Florida on 6/24/11 and its Florida document number is F11000002671
3. This corporation was formed under the laws of Delaware
4. The name and address of each officer and/or director is as follows:

Title:

PSD

C

T

Name and Address

Anders EIF

120 Commerce Blvd., Suite 5
Oldsmar, FL 34677

Ulf Rosen

120 Commerce Blvd., Suite 5
Oldsmar, FL 34677

Svein Leithe

120 Commerce Blvd., Suite 5
Oldsmar, FL 34677

(Attach additional pages if necessary)

Signature of an officer or director

Anders EIF

Typed or printed name of person signing

President

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314