

F11000003490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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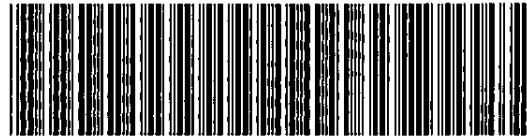
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Redpine Healthcare Technologies, 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:

Mark Carl

Name of Person

Redpine Healthcare Technologies, Inc

Firm/Company

104 S Freya White Flag Bldg Suite 319

Address

Spokane, WA 99202

City/State and Zip code

mark.carl@redpineservices.com ✓

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

For further information concerning this matter, please call:

Mark Carl

Name of Person

at ( 509 ) 228-8357

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

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TALLAHASSEE, FLORIDA

**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. Redpine Healthcare Technologies, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

n/a

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

2. Washington State 3. 20-3253195  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/10/2005 5. Perpetual  
(Date of incorporation) (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. Hancock Center Fourth Floor 1022 West 23rd Street Suite 400 Panama City Florida 32405  
(Principal office address)  
104 S Freya Street White Flag Bldg Suite 319 Spokane WA 99202  
(Current mailing address)

8. Business Expansion and growth opportunities  
(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)

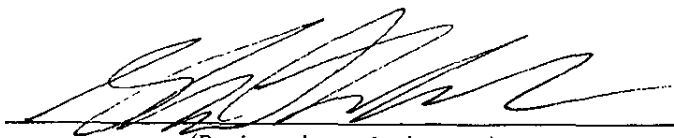
Name: Shad Wheeler

Office Address: Hancock Center Fourth Floor 1022 West 23rd Street Suite 400

Panama City, Florida 32405  
(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.*

  
(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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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Roland Wheeler, JR

Address: 4160 W Eaglerock Dr  
Wenatchee, WA 98801

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

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

Director: Shad Wheeler

Address: Handcock Center Fourth Floor 1022 West 23rd Street Suite 400  
Panama City Florida 32405

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: Shad Wheeler

Address: Handcock Center Fourth Floor 1022 West 23rd Street Suite 400  
Panama City Florida 32405

Vice President: \_\_\_\_\_

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

Secretary: Roland Wheeler, JR

Address: 4160 W Eaglerock Dr Wenatchee WA 98801

Treasurer: \_\_\_\_\_

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

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

13. \_\_\_\_\_

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, F.S.

14. Shad Wheeler, President

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

The State of Washington

Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

**CERTIFICATE OF EXISTENCE/AUTHORIZATION**

**OF**

**REDPINE HEALTHCARE TECHNOLOGIES, INC.**

I **FURTHER CERTIFY** that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 8/10/2005.

I **FURTHER CERTIFY** that as of the date of this certificate, REDPINE HEALTHCARE TECHNOLOGIES, INC. remains active and has complied with the filing requirements of this office.

Date: August 17, 2011

UBI: 602-529-411

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

*Sam Reed*

Sam Reed, Secretary of State