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SECRETARY OF STATE DIVISION OF CORPORATIONS

PS 11/17/11

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: APLICARE /NC	
Name of corporation	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good State above referenced foreign corporation to transact busing	inding" and check are submitted to register the
Please return all correspondence concerning this matter	er to the following:
James Coer	
Name o	f Person
APLICARE INC	
APLICARE INC Firm/Co	mpany
550 RESEARCH PARKWAY	
Add	ress
MERIOEN, Cr 06450 City/State	
City/State	and Zip code
E-mail address: (to be used	7.
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
1 0	
Name of Person at (20)	3) 630 - 4826
Name of Person Area	Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	
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, 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. APCICARE, 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. Convertion 3. O6/5704//
(State or country under the law of which it is incorporated) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address) 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) Scott Kurrzman Name: Minmi , Florida 33/55.
(City) (Zip code) Office Address: 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. 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.

12. Names and busines	ss addresses of o	officers and/or directors	:			
A. DIRECTORS	•					
Chairman:	See	ATTACHMENT				
Address:						
Vice Chairman:						
Address:						
Director:		,				
Address:						· · · · · · · · · · · · · · · · · · ·
Director:						
Address:						
B. OFFICERS						0
President:					NON LI	SECRET
Address:					~ 	<u> </u>
					<u>P</u>	CORPORATIONS
Vice President:					t :-	STATI RATI
Address:					~~~	J. NO
Secretary:						
Address:						
Treasurer:						
Address:			·			
NOTE: If necessary, y	ou may attach a	n addendum to the appl	ication listing additi	onal officers and/or di	irectors.	
13.	ue C C) org.	000			
The officer of director sare true and that he or si third degree felony as p	nigning this docu he is aware that rovided for in s.	iment (and who is listed false information subm 817.155, F.S.	l in number 12 abov	e) affirms that the fact	ts stated he	rein itutes a
11 (/0.00 ~)	(ニー・(/ //だ/	C KA				

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

Board of Directors:

Chairman:

Philip Hamrock 199 Falcon Road

Guilford, CT 06437

Secretary:

Patrick Hatcher 7 Pheasant Run

Windsor, CT 06095

Directors:

Bruce Wilson

136 Concord Drive

Madison, CT 06443

Bruce Wilson Jr. 45 Diary Hill Road

Madison, CT 06443

Michael Kovolchik 1 Overlook Passway

Morris, CT 06763

Rodger Stotz

35 Gannet Drive

Southington, CT 06489

Brian J Herrman

12 Colony Road

Canton, CT 06019

Officers:

President:

Philip Hamrock

199 Falcon Road

Guilford, CT 06437

Secretary:

Patrick Hatcher

7 Pheasant Run

Windsor, CT 06443

Treasurer:

Bruce Wilson

136 Concord Drive

Madison, CT 06443

CEO:

Bruce Wilson Jr.

45 Diary Hill Road

Madison, CT 06443

CFO:

James E Coer

84 Scenic Road

Madison, CT 06443

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

APLICARE, INC.

a domestic STOCK corporation, was filed in this office on December 30, 1999, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Secretary of the State

Date Issued: July 26, 2011

SECRETARY OF STATE DIVISION OF CORPORATIONS

Business ID: 0639005 Express Certificate Number: 2011193704001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov