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.

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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:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

Fax Number

: (850)222-1092 : {850}878-5368

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

Email	Address:			

## FOREIGN PROFIT/NONPROFIT CORPORATION MBI Solutions, Inc.

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

Electronic Filing Menu Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

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## **COVER LETTER**

TO: New Filing Section Division of Corporations						
SUBJECT: MBI Solutions, Inc.						
Name of corporation - must include suffix						
Dear Sir or Madam:	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 ma	tter to the following:					
John J. Hoffmann, Scondary						
Name	of Person					
MBI Solutions, Inc.						
Firm/C	Company					
332 Congress Park Drive						
A	fdress					
Dayton, OH 45459						
City/Sta	te and Zip code					
jhoffmana@premierdors.com						
	ed for future annual report notification)					
For further information concerning this matter, please call:						
at (	en Code & Daytime Telephone Number					
Name of Parson Ar	ea Code & Daytime Telephona Number					
STREET/COURTER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section					
Division of Corporations	Division of Corporations					
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahussee, FL 32314					
Tallahassee, FL 32301	* Conditions of 1 5 340 11					
Enclosed is a check for the following amount:						
S \$70.00 Filing Fee & Certificate of Status	Cortified Copy  Certificate of Status & Certified Copy					

71.619 - 03/34/3014 CT (types Online

## 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.

i. MBI Solutions,			
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED Corp." "Inc." "Co." or "Corp.")	D," "COMPANY," "CORPORATION,"	
•	. , , , , ,		
TE			
		e adopted for the purpose of transacting business in Florida)	
2. OHIO	3	31-1089922	
(Sime or country	under the law of which it is incorporated)	(PEI number, if applicable)	
02/08/1984	5	perpetual	
(Dak	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
5. 01/19/2012			
		in Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.1	1502, F.S., to determine penalty liability)	
4750 Hompstead	Station		<b>L</b>
	(Principal office add	dress)	72 JAN 27
Kottering, OH 4	5429		5 Th
	(Current mailing ad	dress) II	127 至
		PS S	
" —	Medical Billing Services		- P. 11
(Purpose(:	s) of corporation authorized in home state or c	country to be carried out in state of Florida)	, 3 C
. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	THIS TATE
Name:	C T Corporation System	<u></u>	رم الم
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida <u>33324</u>	
	(City)	(Zip code)	
0. Registered as	gent's acceptance:		
	-	tive of process for the whom 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.

Renee Cruz, Asst. Secretary

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.

FL619 - 03/24/2814 C T System Online

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12 JAN 27 AM II: 46

12. Names and business addresses of officers and/or directors;	12 JAN 27 AM II: 4			
A. DIRECTORS	SECRETARY OF STATE			
Chairman:Chairman:				
Address:				
Vice Chairman:				
Address:				
Director: William A. Cole, Jr., MD				
Address: 332 Congress Park Drive				
Dayton, OH 45459				
Director; David C. Romano, MD				
Address: 332 Congress Park Drive				
Dayton, OH 45459				
B. OFFICERS				
President: Ray Doherty				
Address: 4750 Hompstead Station				
Kettering, OH 45429				
Vice President;				
Address:				
Sourctary: John J. Hoffmann				
Address: 332 Congress Park Drive, Dayton, OH 45459				
Treasurer: Randy Hudson				
Address: 332 Congress Park Drive, Dayton, OH 45459				
NOTE: If necessary, you may attach an addendum to the application listing ad	iditional officers and/or directors.			
13. (Separature of Director or Officer listed in number 12 of t	be application)			
14. John J. Hoffmann, Socretary	- 1111			
(Typed or printed name and capacity of person signing	supplication)			

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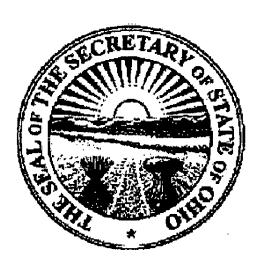
## United States of America State of Ohio Office of the Secretary of State

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show MBI SOLUTIONS, INC., an Ohio corporation, Charter No. 628705, having its principal location in Dayton, County of Montgomery, was incorporated on February 08, 1984 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 29th day of December, A.D. 2011

Ohio Secretary of State

Validation Number: V2011363DEF26F