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Division of Corporations

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

From: Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
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Email Address: Loretta.McCool@unisearch.com

**FOREIGN PROFIT/NONPROFIT CORPORATION
SCRIBES STAT INCORPORATED**

Certificate of Status	0
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4/11/12

**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. SCRIBES STAT INCORPORATED

(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. DELAWARE

(State or country under the law of which it is incorporated)

3.

(FBI number, if applicable)

4. November 29, 2010

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

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

7. 1750 SW Skyline Blvd., Suite 220, Portland, OR 97221

(Principal office address)

1750 SW Skyline Blvd., Suite 220, Portland, OR 97221

(Current mailing address)

8. Medical Transcription Services

(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: **NRAI Services, Inc.**

Office Address: **515 East Park Avenue**

Tallahassee, Florida **32301**

(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.

by: [Signature] Asst. Sec.

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

A. DIRECTORS

Chairman: SEE ATTACHED LIST

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Kathleen M. Myers

Address: 1750 SW Skyline Blvd., Suite 220

Portland, OR 97221

Vice President: _____

Address: _____

Secretary: Jon R. Summers

Address: 805 SW Broadway, Suite 2440, Portland, OR 97205

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. Kathleen M. Myers, President

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

Addendum to Application by Foreign Corporation for Authorization to Transact Business
in Florida: Scribes Stat Incorporated

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

A. DIRECTORS

<u>Name</u>	<u>Business Address</u>
Kathleen M. Myers	1750 SW Skyline Blvd., Suite 220, Portland, OR 97221
Mark Ahn	1750 SW Skyline Blvd., Suite 220, Portland, OR 97221
Daniel Nazarian	1750 SW Skyline Blvd., Suite 220, Portland, OR 97221
Behzad Khianmahd	1750 SW Skyline Blvd., Suite 220, Portland, OR 97221
Kelli O'Laughlin	1750 SW Skyline Blvd., Suite 220, Portland, OR 97221

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCRIBES STAT INCORPORATED" 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 TENTH DAY OF APRIL, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SCRIBES STAT INCORPORATED" WAS INCORPORATED ON THE TWENTY-NINTH DAY OF NOVEMBER, A.D. 2010.

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

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9491597

DATE: 04-10-12