

F12000003958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Siana Cloninger
AUTHORIZATION BY PHONE TO
CORRECT #5
DATE 9/27/12
DOC. EXAM MRD

Office Use Only



700227050687

04/05/12--01017--003 **87.50

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12 SEP 24 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
9/27/12

11/2 191435

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: DC Medical, 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:

Diana S. Cloninger

Name of Person

DC Medical Inc.

Firm/Company

3321 Shady Bend

Address

Ft. Myers, FL 33905

City/State and Zip code

dttd607@aol.com

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

For further information concerning this matter, please call:

Diana Cloninger at (847) 490-9446 or 847-610-4480

Name of Person

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2012

DIANA CLONINGER
DC MEDICAL INC.
3321 SHADY BEND
FT MYERS, FL 33905

SUBJECT: DC MEDICAL INC.
Ref. Number: W12000019435

We have received your document for DC MEDICAL INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

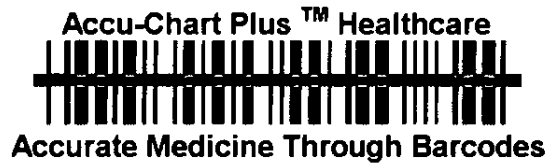
The name in your document is not available since it is the same as, or it is not distinguishable from the name of an existing entity. Therefore, the enclosed document cannot be filed and is being returned to you.

Sections 607.0403(2)(b), 617.0403(2)(b), and 608.4062.(2)(b), Florida Statutes, require all foreign corporations filing a name registration to submit a certificate stating the entities is in good standing under the laws of the state or territory where it is organized. The certificate should be executed by the Secretary of State of such state or territory or by such other official as may have custody of the records pertaining to. It must be dated within the last 90 days.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 412A00011221



September 19, 2012

Ms. Ruby Dunlap

Florida Department of State

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Dear Ms. Dunlap,

In reference to Letter Number: 012A00020850 dated August 13, 2012, please see the change that has been made to your "Application for the Registration of a Foreign Corporate Name" form. Hopefully, this change will allow the application to go forward.

Please contact the undersigned with any issues concerning this application. Thank you for your attention to this matter.

Sincerely,

Diana Cloninger

DC Medical Inc.

3321 Shady Bend

Ft. Meyers, FL 33905



1305 Remington Rd • Suite I • Schaumburg, IL 60173 USA
Phone: 847-252-7300 • Fax: 630-307-5982
www.accuchart.com



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 SEP 24 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 13, 2012

DIANA CLONINGER
DC MEDICAL INC.
3321 SHADY BEND
FT MYERS, FL 33905

SUBJECT: DC MEDICAL INC.
Ref. Number: W12000042142

We have received your document for DC MEDICAL INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 012A00020850

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

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

2. Illinois 3. 26-3463168
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/01/2008 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 2012
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1092 Gannon Ct, Hoffman Estates, IL 60169
(Principal office address)

3321 Shady Bend, Ft Myers, FL 33905
(Current mailing address)

8. US and International Sales
(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: Diana Cloninger

Office Address: 3321 Shady Bend

Ft Myers, Florida 33905
(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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SECRETARY OF STATE

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

A. DIRECTORS

12 SEP 24 AM 11:33

Chairman: Diana S. Cloninger

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Address: 3321 Shady Bend, Ft Myers, FL 33905

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Diana S. Cloninger

Address: 3321 Shady Bend, Ft Myers, FL 33905

Vice President: _____

Address: _____

Secretary: Timothy A. Cloninger

Address: 1092 Gannon Ct., Hoffman Estates, IL 60169

Treasurer: _____

Address: _____

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

13. Diana S. Cloninger

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. Diana Cloninger, President

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

File Number 6680-871-8

FILED

12 SEP 24 AM 11:33



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

DC MEDICAL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 01, 2008, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 31ST day of JULY A.D. 2012 .

Jesse White

Authentication #: 1221302174

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE