Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 12000000195 : (850)521-0821 : (850)558-1515 Phone Fax Number

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

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION DELIVERMED, INC.

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

Electronic Filing Menu Corporate Filing Menu

Help



COVER LETTER

O: New Filing Section Division of Corporations					
SUBJECT: DELIVERMED, 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 bove referenced foreign corporation to transact business in Florida.					
lease return all correspondence concerning this matter to the following:					
ori E. DaCosse					
Name of Person	_				
Sandberg Phoenix & von Gontard P.C.					
Firm/Company 784 Wall Street, Suite 100					
Address	_				
D'Fallon, IL 62269					
City/State and Zip code					
dacosse@sandbergphoenix.com					
E-mail address: (to be used for future annual report notification)	020				
for further information concerning this matter, please call:	ರ ಎ ೧				
ori E. DaCosse at (618) 624-3419	F., 5				
Name of Person Area Code & Daytime Telephone Number					
<u>ئ</u>					
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 melosed is a check for the following amount: MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
\$70.00 Filing Fee \$\ \text{Certificate of Status} \] \$78.75 Filing Fee & Certified Copy \text{Certificate of Status} \] \$287.50 Filing Fee, Certified Copy \text{Certified Copy} \text{Certified Copy} \text{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.

fname unavaile	· · · · · · · · · · · · · · · · · · ·	ne adopted for the purpose of transacting business in	n Plorida)
)elaware		3. <u>46-0659753</u>	
	endor the law of which it is incorporated)	(FEI number, if applicable)	
uly 26, 201	2 of incorporation)	5. Perpetual	
		(Duration: Year corp. will cease to exist or "pe	sbeam)
lpon qualifi	(Date first transacted business	in Florida, if prior to registration) 1502, P.S., to determine penalty liability)	
04 N. Kinc	St., Ste. 500, Wilmington, D	E 19 899	
	(Principal office at		
.O. Box 1	031, Wilmington, DE 1989) 9	
	of corporation authorized in home state or taddress of Florida registered agent: (P	country to be carried out in state of Florida) O. Box NOT acceptable)	
	Corporation Service Company		2
Name:			-
	1201 Hays Street		,
	1201 Hays Street Tallahassee	Florida 32312	0.0
		, Florida 32312 (Zip code)	CO ARI
Name:	Tallahassee	, Florida 32312 (Zip code)	

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. Ivalies and Distincts modicoses of Directs and Or Greening;	
A. DIRECTORS	
Chairmen:	
Address:	
	
Vice Chairman:	<u> </u>
Address:	
Director: Mark Swift	
Address: 220 Metrose Avenue	
Kenilworth, IL 60043	
Director:	
Address:	
B. OFFICERS	
President: Mark Swift	, w.e.
Address: 220 Melrose Avenue	FO 1.
Kenilworth, IL 60043	- J
	-
Vice President:	<u> </u>
Address:	
Mark Suis	. <u>مر</u> نافيا م
Socretary: Mark Swift	
Address: 220 Melrose Avenue, Kenilworth, IL 60043	
Treasurer: Mark Swift	
Address: 220 Metrose Avenue, Kenilworth, IL 60043	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direct	iors.
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 st	
are true and that he or she is aware that false information submitted in a document to the Department of State third degree felony as provided for in s.817.155, F.S.	c constitutes a
14. Mark Swift, President	
(Typed or printed name and capacity of person signing application)	

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DELIVERMED, INC." 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 TWENTIETH DAY OF SEPTEMBER, A.D. 2012.

Jeffrey W. Bullock, Secretary of State

DATE: 09-20-12