## F12000004833

(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:
1212-59674

Office Use Only



200241836812

SUFFICIENCY OF FILIN

DEPARTOR OF CONTRACTORS
AND A PART OF STATE
OF A PA

TO NOV 28 AN 9-12

1/4



ACCOUNT NO. : I2000000195 REFERENCE : 398891 7671006 AUTHORIZATION COST LIMIT ORDER DATE: October 31, 2012 ORDER TIME : 1:47 PM ORDER NO. : 398891-005 CUSTOMER NO: 7671006 FOREIGN FILINGS NAME: NICO CORPORATION XXXX QUALIFICATION (TYPE: CO) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER:

## 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.

<ol> <li>NICO COF</li> </ol>				
(Enter name o	f corporation; must include "INCORPORATEI	O," "COMPANY," "CORPORATION,"		
"Inc.," "Co.,"	"Corp," "Inc," "Co," or "Corp.")			
	euro Corporation		<del></del>	
(If name unava	nilable in Florida, enter alternate corporate nam	e adopted for the purpose of transacting bu	siness in F	lorida)
2. Indiana	3			
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable	lc)	
4, 10/18/2007	5	Perpetual		
(Da	te of incorporation)	(Duration: Year corp. will cease to exist	or "perpe	tual")
6. 12/13/2010				
		in Florida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability)		
7. 9190 Priority	Way West Drive, Suite 203 Indianapo	lis IN 46240		
7. 9190 Priority	Way West Drive, Suite 203 Indianapo (Principal office add		<b>P</b>	ন
7. 9190 Priority			MUM	75 25
7. 9190 Priority		iress)	MENATIA	75 No.
	(Principal office add	iress)	SECRETARY ALLAMASSE	NOV 28
	(Principal office add	iress)	SECRETARY OF	NOV 28
8. Medical devi	(Principal office add	iress)	SECRETARY OF ST	NOV 28 AH
8. Medical devi (Purpose	(Principal office add (Current mailing add cc sales (s) of corporation authorized in home state or c	dress)  ountry to be carried out in state of Florida)	SECRETARY OF STATE	NOV 28
8. Medical devi (Purpose 9. Name and stre	(Principal office additional content mailing additional content content content additional content content additional content cont	dress)  ountry to be carried out in state of Florida)	SECRETARY OF STATE	NOV 28 AH
8. Medical devi (Purpose	(Principal office add (Current mailing add cc sales (s) of corporation authorized in home state or c	dress)  ountry to be carried out in state of Florida)	GEORGIARY OF STAFF	NOV 28 AH 9: 1
8. Medical devi (Purpose 9. Name and <u>stre</u> Name:	(Principal office additional content mailing additional content content content additional content content additional content cont	dress)  ountry to be carried out in state of Florida)	RECRETARY OF STATE	NOV 28 AH 9: 1
8. Medical devi (Purpose 9. Name and stre	(Principal office additional content mailing additional content mailing additional components of the c	dress)  ountry to be carried out in state of Florida)	SECRETARY OF STATE	NOV 28 AH 9: 1

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.

Corporation Service Company

By: Stephanie Milnes Asst. V.P.

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.

FILED 12. Names and business addresses of officers and/or directors: 12 NOV 28 AN 9: 13 A. DIRECTORS Chairman: James Baumgardt Address: 9190 Priority Way West Drive, Ste 203 Indianapolis, IN 46240 Vice Chairman: n/a Address: \_ Director: Jim Pearson Address: 9190 Priority Way West Drive, Ste 203 Indianapolis, IN 46240 Director: Jeffrey Hanthorn Address: 9190 Priority Way West Drive, Ste 203 Indianapolis, IN 46240 **B. OFFICERS** President: Jim Pearson Address: 9190 Priority Way West Drive, Ste 203 Indianapolis, IN 46240 Vice President: Joseph Mark Address: 9190 Priority Way West Drive, Ste 203 Indianapolis, IN 46240 Secretary: Jeff Hanthorn Address: 9190 Priority Way West Drive, Stc 203 Treasurer: Indianapolis, IN 46240 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. JEFFREY L. HANTHORN VICE PRESIDENT + COO

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

## STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

FILED

12 NOV 28 AM 9: 13

SECRETARY OF STATE LALLAHASSEE, FLORIDA

To Whom These Presents Come, Greetings:

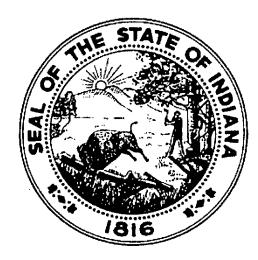
I, Connie Lawson, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

## NICO CORPORATION

duly filed the requisite documents to commence business activities under the laws of State of Indiana on October 18, 2007, and was in existence or authorized to transact business in the State of Indiana on October 31, 2012.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Thirty-First Day of October, 2012.

Corrie Zawson

Connie Lawson, Secretary of State

2007101900469 / 2012103150393