

F13000000096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

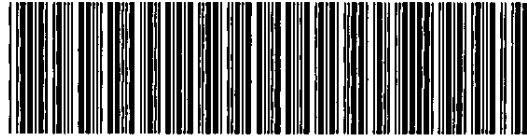
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
13 JAN -7 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. Bureau JAN 8 2013

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Novaerus US 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:

Jason R. Maughan

Name of Person

Jason R. Maughan, LL.M. Attorney At Law

Firm/Company

1101 Periwinkle Way Suite 103

Address

Sanibel, Fl. 33957

City/State and Zip code

kevin@novaerus.com

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

For further information concerning this matter, please call:

Jason R. Maughan

Name of Person

at (239) 472-2424

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:

☒ \$10.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

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

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

2. Delaware 3. 990375417
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/01/2012 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 2559 Webb Avenue, Del Ray Beach, Fl. 33444
(Principal office address)
470 Atlantic Avenue 4th Floor, Boston, Ma. 02210
(Current mailing address)

8. Airborne Infection Control Equipment
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

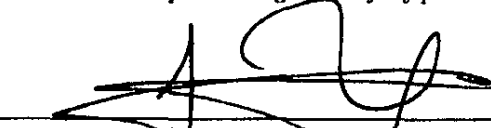
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jason R. Maughan

Office Address: 1101 Perinkle Way, Suite 103
Sanibel, Florida 33957
(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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13 JAN -7 PM 4:05
SECRETARY OF
TALLAHASSEE

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Kevin Maughan

Address: 1408 N. Westshore Blvd. Suite 501

Tampa, Fl 33607

Director: Eric Murphy

Address: 1408 N. Westshore Blvd. Suite 501

Tampa, Fl 33607

B. OFFICERS

President: Kevin Maughan

Address: 1408 N. Westshore Blvd. Suite 501

Tampa, Fl 33607

Vice President: _____

Address: _____

Secretary: Eric Murphy

Address: 1408 N. Westshore Blvd. Suite 501 Tampa, Fl 33607

Treasurer: Eric Murphy

Address: 1408 N Westshore Blvd. Suite 501 Tampa, Fl 33607

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. KEVIN MAUGHAN - PRESIDENT

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

FILED
13 JAN 17 PM 4:05
TALLAHASSEE FL

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "NOVAERUS US INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE FIRST DAY OF MARCH, A.D. 2012, AT 1:42 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "AIRMANAGER US INC." TO "NOVAERUS US INC.", FILED THE SIXTH DAY OF AUGUST, A.D. 2012, AT 12:05 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID CORPORATION, "NOVAERUS US INC.".

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
13 JAN -7 PM 6:05
SECRETARY OF STATE
DELAWARE

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0069998

DATE: 12-14-12