

F1300000430

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA0000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5369

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

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DIVISION OF CORPORATIONS
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**FOREIGN PROFIT/NONPROFIT CORPORATION
HILL-ROM DTC, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	09
Estimated Charge	\$70.00

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Hill-Rom DTC, 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:

Kevin Warns
Name of Person

Hill-Rom Holdings, Inc
Firm/Company

Two Prudential Plaza, Suite 4100
Address

Chicago, IL 60601
City/State and Zip code

kevin.warns@hill-rom.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Warns at (312) 819-7229
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

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**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. Hill-Rom DTC, 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. Indiana 3. 90-0901989
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/03/2012 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 1069 State Route 46E, Batesville, IN 47006
(Principal office address)

same
(Current mailing address)

8. To sell Hill-Rom products direct to consumers
(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: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

CT Corporation System
By: James M. Halpin Assistant Secretary
(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 SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS SEE ATTACHMENT

President: _____

Address: _____

Vice President: Richard G. Keller

Address: _____

Secretary: _____

Address: _____

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. _____ Robert L. Macklin, Vice President

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

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1	Full Name:	John J. Greisch
	Officer/Director:	Officer
	Officer's Title:	President and Chief Executive Officer
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
2	Full Name:	Susan Ruth Lichtenstein
	Officer/Director:	Officer
	Officer's Title:	Senior Vice President, Corporate Affairs, Chief Legal Officer and Secretary
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
3	Full Name:	Mark Guinan
	Officer/Director:	Officer
	Officer's Title:	Senior Vice President, Chief Financial Officer
	Director's Title:	
	Business Address:	
	City:	
	State:	
	ZIP Code:	
4	Full Name:	Robert L. Macklin
	Officer/Director:	Officer
	Officer's Title:	Vice President, Associate General Counsel and Assistant Secretary
	Director's Title:	
	Business Address:	
	City:	
	State:	

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- ZIP Code:
- 5 Full Name: Michael S. Macek
Officer/Director: Officer
Officer's Title: Vice President and Treasurer
Director's Title:
Business Address:
City:
State:
ZIP Code:
- 6 Full Name: Joseph A. McGowan
Officer/Director: Officer
Officer's Title: Vice President, Tax
Director's Title:
Business Address:
City:
State:
ZIP Code:
- 7 Full Name: Timothy Renfro
Officer/Director: Officer
Officer's Title: Assistant Secretary
Director's Title:
Business Address:
City:
State:
ZIP Code:
- 8 Full Name: Joyce Hoying
Officer/Director: Officer
Officer's Title: Assistant Secretary
Director's Title:
Business Address:
City:
State:
ZIP Code:
- 9 Full Name: Susan Ruth Lichtenstein
Officer/Director: Director

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Officer's Title:

Director's Title:

Director

Business Address:

City:

State:

ZIP Code:

10 Full Name:

Mark Gulnan

Officer/Director:

Director

Officer's Title:

Director's Title:

Director

Business Address:

City:

State:

ZIP Code:

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

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

HILL-ROM DTC, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on October 03, 2012, and was in existence or authorized to transact business in the State of Indiana on January 29, 2013.

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 Twenty-Ninth Day of January, 2013.

Connie Lawson

Connie Lawson, Secretary of State

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