

F13000004508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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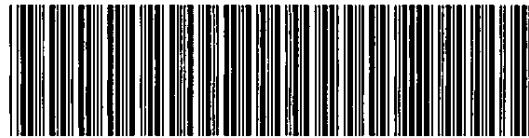
(Business Entity Name)

(Document Number)

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13 OCT 15 AM 7:32
SECRETARY OF STATE
TALLAHASSEE FLORIDA

W13-54230

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: New England Medical Legal Consultants, Inc d/b/a Northstar Reporting
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:

Lois Mahoney
Name of Person

New England Medical Legal Consultants, Inc
Firm/Company

1507 Post Road
Address

Warwick Rd 02886
City/State and Zip code

consultants@nmlc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lois Mahoney at (401) 352-0088
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

RECEIVED
13 OCT 15 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 30, 2013

LOIS MAHONEY
1507 POST RD
WARWICK, RI 02888

SUBJECT: NEW ENGLAND MEDICAL LEGAL CONSULTINTS, INC DBA
NORTHSTAR REPORTING
Ref. Number: W13000054230

We have received your document for NEW ENGLAND MEDICAL LEGAL CONSULTINTS, INC DBA NORTHSTAR REPORTING and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jessica A Fason
Regulatory Specialist II

Letter Number: 813A00022935

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. New England Medical Legal Consultants, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Rhode Island 3. 050456659
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. October 18, 1990 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 1507 Post Road Warwick Rd 02886
(Principal office address)
- 1507 Post Road Warwick Rd 02886
(Current mailing address)

8. Court reporting and transcribing depositions
(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: Erin Pallard

Office Address: 233 Hemlock Street
Altamonte Springs, Florida 32701
(City) (Zip code)

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TALLAHASSEE FLORIDA

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.

Erin Pallard

(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.

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

A. DIRECTORS

Chairman: Lois Mahoney

Address: 1507 Post Road

Warwick RI 02888

Vice Chairman: Kenneth Mahoney

Address: 1507 Post Road

Warwick RI 02888

Director: Kenneth Mahoney

Address: 1507 Post Road

Warwick RI 02888

Director: N/A

Address: _____

B. OFFICERS

President: Lois Mahoney

Address: 1507 Post Road

Warwick RI 02888

Vice President: Kenneth Mahoney

Address: 1507 Post Road

Warwick RI 02888

Secretary: Kenneth Mahoney

Address: 1507 Post Road Warwick RI 02888

Treasurer: Kenneth Mahoney

Address: 1507 Post Road Warwick RI 02888

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

13.

Lois O. Mahoney President
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.

LOIS MAHONEY PRESIDENT

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



State of Rhode Island and Providence Plantations

A. Ralph Mollis

Secretary of State

Certification Number: 13090026030

The office of the Secretary of State of the State of Rhode Island and Providence Plantations,
HEREBY CERTIFIES, that

NEW ENGLAND MEDICAL-LEGAL CONSULTANTS, INC.

a Rhode Island corporation, filed original articles of incorporation in this office on

October 18, 1990

Effective

October 18, 1990

IT IS FURTHER CERTIFIED that as of this date said corporation is duly organized and existing
under and by virtue of the State of Rhode Island.

SIGNED AND SEALED ON

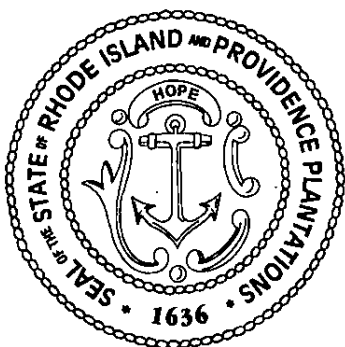
Tuesday, September 10, 2013

A. Ralph Mollis

Secretary of State

Jeanne-Marie Ryan

Authorized Agent



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13 OCT 15 AM 7:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA