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TO:

New Filing Section

Division of Corporations

BMI IMAGING SYSTEMS, 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:

JANICE HARRISON

Name of Person

BMI IMAGING SYSTEMS, INC.

Firm/Company

1115 E. ARQUES AVE.

Address

SUNNYVALE, CA 94085

City/State and Zip code

jharrison@bmiimaging.com

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

For further information concerning this matter, please call:

JANICE HARRISON

at (408) Area Code & Daytime Telephone Number

Name of Person

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

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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 Filling 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.

		ne adopted for the purpose of transacting business in	n Florida)
CALIFOR	RNIA	(FEI number, if applicable)	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
NOVEME	BER 26, 1958	PERPETUAL	
•	of incorporation)	(Duration: Year corp. will cease to exist or "po	rpetual")
DECEME	BER 2013		
		in Florida, if prior to registration) .1502, F.S., to determine penalty liability)	
1115 E Δ	RQUES AVE., SUNNYV		
IIIV E. A	(Principal office ac		
1115 F A	RQUES AVE. SUNNYVA	•	
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A film	scanning project for th	ne Florida State Commission	E E
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)	V 25
Name and street	et address of Florida registered agent: (I	P.O. Box NOT acceptable)	T =
3.	Change T Dallan	, ,	PH 4: 55 OF STATE E FLORID
Name:	Sharon J Ballgae		ON AIR
ffice Address:	1845 Town Center Blvd,	Ste 210	
	Fleming Island	Florida 32003	
	(City)	, Florida <u>32003</u> (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. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: WILLIAM D. WHITNEY
Address: 1115 E. ARQUES AVE.
SUNNYVALE, CA 94085
Vice President: BRAD PENFOLD
Address: 749 W. STADIUM LANE
SACRAMENTO, CA 95834
Secretary: JANICE HARRISON
1115 E. ARQUES AVE. SUNNYVALE, CA 94085
Treasurer: JANICE HARRISON
1115 E. ARQUES AVE. SUNNYVALE, CA 94085
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 constitute a third degree felony as provided for in s.817.155, F.S.
JANICE HARRISON - SECRETARY

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

BMI IMAGING SYSTEMS, INC.

FILE NUMBER:

C0364202

FORMATION DATE:

11/26/1958

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of Californ hereby certify:

The records of this office indicate the entity is authorized to receive all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 14, 2013.

DEBRA BOWEN
Secretary of State