

PK4000000676

(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:

Office Use Only



200255632462

02/10/14--01053--008 \*\*78.75

FILED  
14 FEB 10 PM 2:28  
TALLAHASSEE, FLORIDA

MDP 2/14

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Ross Information Technologies II, 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:

Seth P. Tompkins, Esq.

Name of Person

Sullivan, Ward, Asher & Patton, P.C.

Firm/Company

25800 Northwestern Highway, Suite 1000

Address

Southfield, MI 48075

City/State and Zip code

sptompkins@swappc.com

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

For further information concerning this matter, please call:

Antoinette Bostice at ( 248 ) 746-0700

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

**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. **Ross Information Technologies II, 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. **Michigan**

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. **08/24/2009**

(Date of incorporation)

5. **PERPETUAL**

(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. **255 Atlantis Cir., Unit #301D, St. Augustine, FL 32080**

(Principal office address)

**25800 Northwestern Highway, Suite 1000, Southfield, MI 48075**

(Current mailing address)

8. **Provide IT consulting services to healthcare organizations**

(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: **Brian R. Ross**

Office Address: **255 Atlantis Cir., Unit #301D**

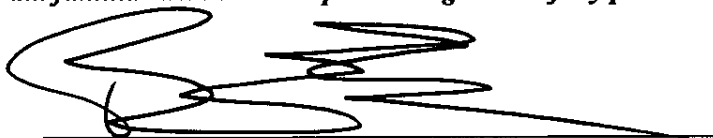
**St. Augustine**, Florida **32080**

(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.

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Brian R. Ross

Address: 255 Atlantis Cir., Unit #301D, St. Augustine, FL 32080

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Brian R. Ross

Address: 255 Atlantis Cir., Unit #301D, St. Augustine, FL 32080

Treasurer: Brian R. Ross

Address: 255 Atlantis Cir., Unit #301D, St. Augustine, FL 32080

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

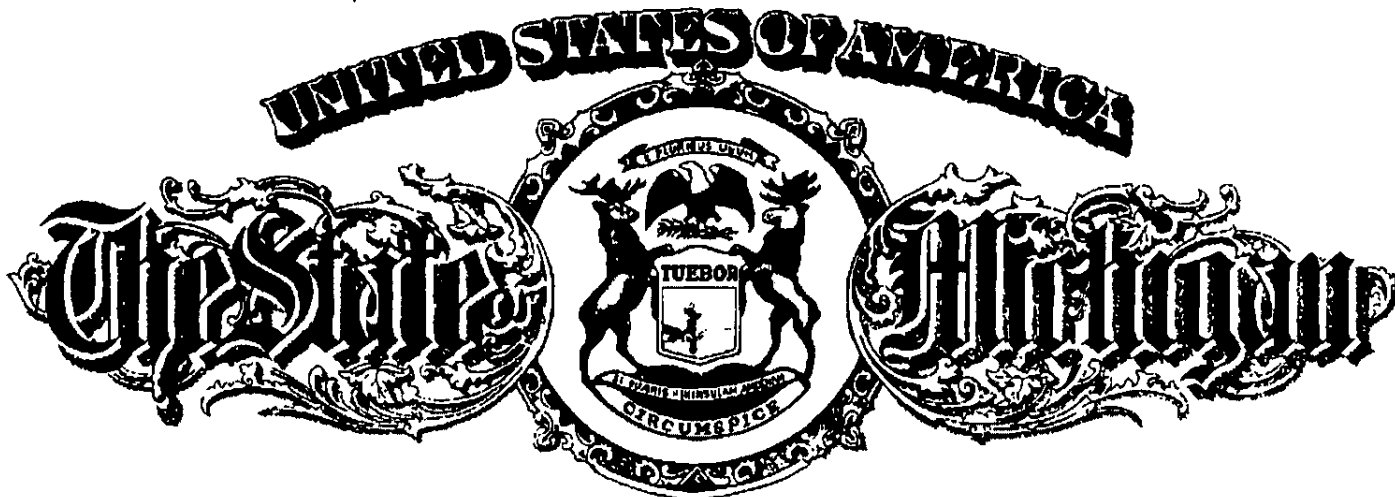
13. \_\_\_\_\_

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. Brian R. Ross - President, Secretary & Treasurer

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



**Department of Licensing and Regulatory Affairs**

**Lansing, Michigan**

*This is to Certify That*

**ROSS INFORMATION TECHNOLOGIES II, INC.**

*was validly incorporated on August 24, 2009, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.*

*This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.*

*This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.*

14 FEB 10 PM 2:28  
RECEIVED  
STATE OF MICHIGAN  
LANSING



*In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 22nd day of January, 2014.*

*[Signature]*

Alan J. Schafke, Director