

F15000000872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

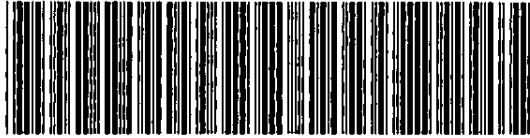
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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02/02/15--01027--023 **92.50

FILED
15 MAR -2 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3 2 15 18

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: OrthoAccel Technologies, 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:

Craig Martin

Name of Person

OrthoAccel Technologies, Inc.

Firm/Company

6575 West Loop South, Suite 200

Address

Bellaire, TX 77401

City/State and Zip code

cmartin@orthoaccel.com

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

For further information concerning this matter, please call:

Craig Martin

Name of Person

at (832) 631-1658

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. OrthoAccel Technologies, 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. Delaware 3. 74-3163359

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/03/2006 5. (Duration: Year corp. will cease to exist or "perpetual")

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual")

6. 06/01/2012

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6575 West Loop South Ste 200, Bellaire, TX 77401

(Principal office address)

6575 West Loop South Ste 200, Bellaire TX 77401

(Current mailing address)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City)

(Zip code)

9. 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.

FILED 15 MAR -2 10:04 AM 2015 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Brandy Vendrick 1-5-2015 (Registered agent's signature)

10. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED
15 MAR -2 PM 12:04
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Mike Lowe

Address: 6575 West Loop South, Ste 200, Bellaire, TX 77401

Vice President: Kelly Enos

Address: 6575 West Loop South, Ste 200, Bellaire, TX 77401

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. 

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.

13. Mike Lowe, President

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORTHOACCEL TECHNOLOGIES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF DECEMBER, A.D. 2014.

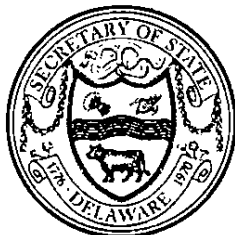
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORTHOACCEL TECHNOLOGIES, INC." WAS INCORPORATED ON THE THIRD DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

4087619 8300

141501917




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1933692

DATE: 12-08-14



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Application for Registration for Orthoaccel Technologies, Inc. (file number 800791117), a DELAWARE, USA, Foreign For-Profit Corporation, was filed in this office on March 21, 2007.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 08, 2014.



NANDITA BERRY

Nandita Berry
Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 9, 2015

CRAIG MARTIN
6575 WEST LOOP SOUTH, SUITE 200
BELLAIRE, TX 77401

SUBJECT: ORTHOACCEL TECHNOLOGIES, INC.
Ref. Number: W15000009283

RECEIVED
DIVISION OF CORPORATIONS
15 MAR -2 PM 1:26

We have received your document for ORTHOACCEL TECHNOLOGIES, INC. and your check(s) totaling \$92.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return the corrected original and one copy of 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.

Christine Haney
Regulatory Specialist II
New Filing Section

Letter Number: 515A00002630

*Please see attach
Cert of Good Standing*

2/19/15