

F15000002094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

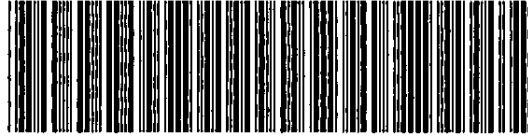
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~1515-24569~~

Office Use Only



600271294716

04/06/15--01041--011 \*\*87.50

05/15/15--01006--002 \*\*800.00

15 MAY 13 PM 4:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

Handwritten signature



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 9, 2015

RICK POPE  
9645 SCRANTON RD, STE 160  
SAN DIEGO, CA 92121

SUBJECT: COGNITIVE MEDICAL SYSTEMS, INC  
Ref. Number: W15000024569

We have received your document for COGNITIVE MEDICAL SYSTEMS, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 215A00007042

## COVER LETTER

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

**SUBJECT:** COGNITIVE MEDICAL 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:

**RICK POPE**

Name of Person

**COGNITIVE MEDICAL SYSTEMS, INC**

Firm/Company

**9645 SCRANTON RD, STE 160**

Address

**SAN DIEGO, CA 92121**

City/State and Zip code

**CONTRACTS@COGNITIVEMEDICINE.COM**

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

For further information concerning this matter, please call:

**RICK POPE**

Name of Person

at ( **858** ) **461-8607**

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:

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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. COGNITIVE MEDICAL SYSTEMS, 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**

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

**3. 27-4258235**

(FEI number, if applicable)

**4. 12/10/2010**

(Date of incorporation)

**5. PERPETUAL**

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

**6. 11/18/2013**

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

**7. 9645 SCRANTON RD, STE 160, SAN DIEGO, CA 92121**

(Principal office address)

**9645 SCRANTON RD, STE 160, SAN DIEGO, CA 92121**

(Current mailing address)

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

Name: **Corporation Services Company**

Office Address: **1201 Hays Street**

**Tallahassee**

(City)

**Florida 32301**

(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.*

Corporation Service Company

By: Brandy Kendrick

(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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 MAY 13 PM 4:18

APPROVAL  
AND  
FILED

APPROVED  
AND  
FILED

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

**A. DIRECTORS**

15 MAY 13 PM 4:18

Chairman: MARY LACROIX, CHAIRMAN OF THE BOARD

Address: 4911 MOUNT ELBRUS DR

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SAN DIEGO, CA 92117

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

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

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

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

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

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

**B. OFFICERS**

President: EMORY FRY, CEO

Address: 4911 MOUNT ELBRUS DR

SAN DIEGO, CA 92117

Vice President: DOUGLAS BURKE, PRESIDENT

Address: 14174 BAHAMA COVE

DEL MAR, CA 92014

Secretary: RICK POPE, COO

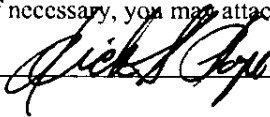
Address: 1053 CREST DRIVE, ENCINITAS, CA 92024

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. RICK POPE

(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 "COGNITIVE MEDICAL SYSTEMS, 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 SIXTH DAY OF MAY, A.D. 2015.

APPROVED  
AND  
FILED

15 MAY 13 PM 4:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



4874952 8300

150612227

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2352774

DATE: 05-06-15