

F18000008902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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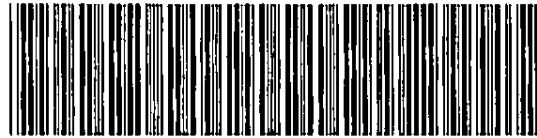
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
18 FEB 21 PM 1:06
FEB 21 2018

J. LEGGETT
FEB 22 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Quality Solutions, 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:

Ronda Hoover

Name of Person

Foulston Siefkin LLP

Firm/Company

1551 N. Waterfront Parkway, Suite 100

Address

Wichita, Kansas 67206

City/State and Zip code

Janella.smith@qsifacilities.com

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

For further information concerning this matter, please call:

Ronda Hoover

at (316) 291-9520

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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 &
Certificate of Status | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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. Quality Solutions, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Quality Solutions, Inc. of Kansas
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Kansas 3. 0742827787
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 2, 1997 5. _____
(Date of incorporation) (Date of duration, if other than 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. 128 North First Street, Colwich, Kansas 67030
(Principal office address)
- P.O. Box 589, Colwich, Kansas 67030
(Current mailing address, if different)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

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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.

C T Corporation System

By: _____

Jan M. Halpin

(Registered agent's signature)

James M. Halpin
Assistant Secretary

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: See attached listing of all Directors.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Joe Kimser

Address: 128 North First Street, Colwich, Kansas 67030

Vice President: Eric Crabb

Address: 128 North First Street, Colwich, Kansas 67030

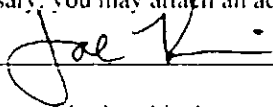
Secretary: Scott Harrison

Address: 220 Elm Street, New Canaan, Connecticut 67030

Treasurer: Steve Garrett

Address: 128 North First Street, Colwich, Kansas 67030

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 11 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. Joe Kimser, President

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

11. Names and business addresses of officers and/or directors: (continued from previous page)

A. DIRECTORS

Director: Eric Dunn

Address: 128 North First Street, Colwich, Kansas 67030

Director: Joe Kirmser

Address: 128 North First Street, Colwich, Kansas 67030

Director: Thomas Burger

Address: 220 Elm Street, New Canaan, Connecticut 06840

Director: Jeff Peterson

Address: 220 Elm Street, New Canaan, Connecticut 06840

Director: Scott Harrison

Address: 220 Elm Street, New Canaan, Connecticut 06840

Director: Pat Harlow

Address: 220 Elm Street, New Canaan, Connecticut 06840

Director: Mike Latham

Address: 220 Elm Street, New Canaan, Connecticut 06840

STATE OF KANSAS
OFFICE OF
SECRETARY OF STATE
KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 2479590

Entity Name: QUALITY SOLUTIONS, INC.

Entity Type: KANSAS FOR PROFIT CORPORATION

State of Organization: KS

Resident Agent: QUALITY SOLUTIONS, INC.

Registered Office: 128 N 1st Street, COLWICH, KS 67030

was filed in this office on May 02, 1997, and is in good standing, having fully complied with all requirements of this office.

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



In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of January 12, 2018

KRIS W. KOBACH
SECRETARY OF STATE

Certificate ID: 1019946 - To verify the validity of this certificate please visit <https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.