

F190000002460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

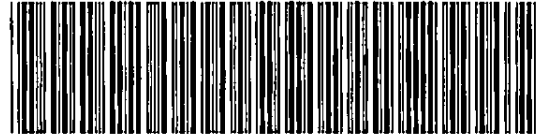
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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MAY 28 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2019

VANDA WINAKOR
45 PLAINS RD
ESSEX, CT 06426

SUBJECT: SHORE MEDEQUIP INC
Ref. Number: W19000050619

We have received your document for SHORE MEDEQUIP 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):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

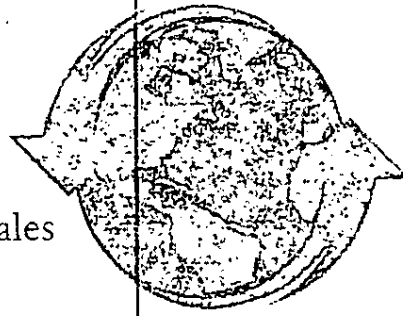
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 319A00010591

SHOREMEDUEQUIP

Worldwide Preowned Medical Equipment Sales



April 24, 1918

FLORIDA DEPARTMENT OF STATE
DIVISION CORPORATIONS

To Whom It May Concern:

I, Teresita McDowell have no intentions to open Shore Medequip LLC. Document # L1900085143. I give permission to use the same name. Shore Medequip LL for the foreign entity. Please call with any questions. Thank you.

Teresita McDowell
Owner/President

5-14-19

Attn: Brooke K 5-24-19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ShoreMED EQUIP 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:

Vanda Winkler
Name of Person

Shore medequip INC
Firm/Company

45 Plains Rd
Address

Essex CT 06426
City/State and Zip code

vanda@shoremedequip.com
E-mail address: (to be used for future annual report notification)

2019 MAY 24 PM 2:05

For further information concerning this matter, please call:

Vanda at (800) 874 4886
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

2019 MAY 24 PM 4:11

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. Shoremedequip INC
(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

Shoremedequip INC
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. CT 3. 82-4622619
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 3-2-18 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. 45 Plains Rd Essex CT 06426
(Principal office address)

same
(Current mailing address, if different)

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

Name: Teresita McDowell

Office Address: 7528 Grande Pine Rd

Bokeelia Florida 33922
(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.

[Signature]
(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: _____

B. OFFICERS

President: Teresita McDowell

Address: 11 DEER Run Rd

Old Saybrook CT 06475

Vice President: _____

Address: _____

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 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. Teresita McDowell, President

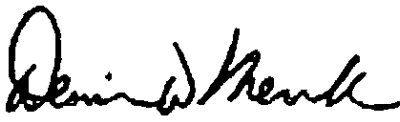
(Typed or printed name and capacity of person signing application)

Secretary of The State of Connecticut

I, the Secretary of The State of Connecticut, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

SHOREMEDEQUIP INC

a domestic STOCK corporation, was filed in this office on March 02, 2018. a certificate of dissolution
has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of
this office such corporation is in existence.



Secretary of The State of Connecticut

Date Issued: March 29, 2019