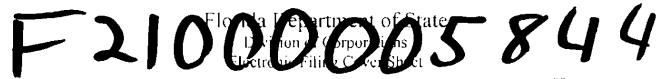
From: Kimberly Laughrey

10/13/21, 11:12 AM

Division of Corporations



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From:

Account Name : C T CORPORATION SYSTEM

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Franil	Address:			

FOREIGN PROFIT/NONPROFIT CORPORATION RADIOLOGICAL SERVICE TRAINING INSTITUTE, INC.



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Help

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.

	OGICAL SERVICE TRAINING INST corporation; must include "INCORPORATED," Corp.," "Inc.," "Co.," or "Corp.")		IN,"
он	able in Florida, enter alternate corporate name	34-1491878	
(State or count	3. ry under the law of which it is incorporated)		
408/30/1985	5. e of incorporation)	(Date of duration, if othe	
(Dat UPON FILING 6.	e of incorporation)	(Date of duration, if othe	r than perpetual)
_	(Date first transacted business it (SEE SECTIONS 607.1501 & 607.15 Solon, OH 44139	502, F.S., to determine penalty liabi	dity)
	(Princis	oal office address)	
	,	ng address, if different)	ZIZI OCT
Name and stre Name:	et address of Florida registered agent: (P.C C T Corporation System	J. Box <u>NOT</u> acceptable)	OCT 13 PH 2
Office Address:	1200 South Pine Island Road		22
	Plantation,	33324 , Florida	े लें
	(City)	(Zip code)	
Having been nar designated in thi further agree to	ent's acceptance: ned as registered agent and to accept serve s application, I hereby accept the appoints comply with the provisions of all statutes i familiar with and accept the obligations of CT Corporation Syste	ment as registered agent and ag relative to the proper and comp of my position as registered age	gree to act in this capacity. I lete performance of my nt.
	C 1 Corporation by an		Christine Kelm
В		C NUMERINI VOLIN	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 Scoretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

From: Kimberly Laughrey

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

A. DIRECTORS
Chairman:
Address:
Vice Chairmen:
Address:
Todd Boyland
Director: 30745 Solon Rd, Solon OH 44139
Address:
Terrence Speth
Director: 30745 Solon Rd, Solon OH 44139
Address:
B. OFFICERS
President:
Address:
Vice President:
Address:
Secretary:
Address:
Treasurer:
NOTE: If necessary, you may attach up addengum to the application listing additional officers and/or directors.
NOTE: If necessary, voic may attract of additional transfer and additional tra
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
The officer or director signing this document (and who is fisted in fulfille) in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
Todd Boyland, CEO
(Typed or printed name and capacity of person signing application)

To: -18506176383 Page: 6 of 6 2021-10-13 09:14:18 CST 12122023573 From: Kimberly Laughrey

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities: that said records show RADIOLOGICAL SERVICE TRAINING INSTITUTE, INC., an Ohio corporation, Charter No. 662170, having its principal location in Chagrin Falls, County of Cuyahoga, was incorporated on August 30, 1985 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 7th day of October, A.D. 2021.

Ohio Secretary of State

Ful flore

Validation Number: 202128003286