

6/22/20

F22000003743

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000243966 3)))



H210002439663ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page
Doing so will generate another cover sheet

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
ON TARGET LABORATORIES, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

RECEIVED

2021 JUN 22 PM 3:50

Electronic Filing Menu

Corporate Filing Menu

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.*

ON TARGET LABORATORIES, INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

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

2. DE 3. 82-3012159
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/10/2014 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. Not prior to registration
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357
(Principal office address)

(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)

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: Christine Kelm Christine Kelm - Assistant Secretary
(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.

FILED
2021 JUN 22 AM 11:31
DEPT. OF STATE
TALLAHASSEE, FL

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

A. DIRECTORS

Chairman: Fritz French
 Address: 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357

Vice Chairman: _____
 Address: _____

Director: Bernie Hatfey
 Address: 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357

Director: David Stone
 Address: 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357

B. OFFICERS

President: Chris Barys
 Address: 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357

Vice President: _____
 Address: _____

Secretary: Tim Biro
 Address: 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357

Treasurer: Patrick Spangler
 Address: 1281 Win Hentschel Blvd, Suite 2542, West Lafayette, IN 47906-4357

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

12. Patrick Spangler _____

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 18A-11-10-3, F.S.

13. Patrick Spangler, treasurer _____

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

On Target Laboratories, Inc

Additional Directors

Michael Wassernian

1281 Win Hentchel Blvd, Suite 2542

West Lafayette, IN 47906-4357

Kadir Kadhireson

1281 Win Hentchel Blvd, Suite 2542

West Lafayette, IN 47906-4357

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ON TARGET LABORATORIES, 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 TWENTY-SECOND DAY OF JUNE, A.D. 2021.

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

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



5479545 8300

SR# 20212511519

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203498535

Date: 06-22-21