

F9600000547

Joan L. Phillips

PO Box 366
Riverside, PA 17868

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

900001605139

-10/10/95--01069--004

*****70.00 *****70.00

W95-20638

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (If known):

1. COM/PLT Inc. (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

96 FEB - AM 2:26

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SECRETARY OF STATE
PAID IN FULL
CORPORATIONS

mtu

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A. Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

per Joan
to add Inc.
to dbA name.

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

October 17, 1995

JOAN L. PHILLIPS
% COM/PLI, INC.
P.O. BOX 366
RIVERSIDE, PA 17868

SUBJECT: COM/PLI, INC.
Ref. Number: W95000020638

56 FEB -1 AM 2:26

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

We have received your document for COM/PLI, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

Please list the street address of each officer/director. If the officer/director does not have a street address, list the mailing address and write (N/A).

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 (904) 487-6097.

Michael Mays
Document Specialist

Letter Number: 595A00046746



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

January 16, 1996

JOAN L. PHILLIPS
% COM/PLI, INC.
P.O. BOX 366
RIVERSIDE, PA 17868

SUBJECT: COM/PLI, INC.
Ref. Number: W95000020638

We have received your document for COM/PLI, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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 (904) 487-6097.

Michael Mays
Document Specialist

Letter Number: 396A00001914

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DIVISION OF CORPORATIONS
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RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned JOAN L. PHILLIPS, do hereby certify
that this Resolution of the Board of Directors of COM/PLI, INC
a corporation duly organized and existing under the laws of the State of PENNSYLVANIA
was duly adopted on JANUARY 26, 19 96.

Resolved, that COM/PLI, INC, organized
and existing in the State of PENNSYLVANIA, hereby adopts the
name ONCO/COMP, Inc. for use in Florida.

Dated: 1/26/96

Joan L. Phillips
Signature of at least one director

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STATE
RECORDS
DIVISION

**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. COM/PLI, Incorporated
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Pennsylvania
(State or country under the law of which it is incorporated)
3. _____
(FEI number, if applicable)
4. April 11, 1990
(Date of Incorporation)
5. perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. none yet - contract pending
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))
7. PO Box 366
Riverside, PA 17868
(Current mailing address)
8. Cancer Data Management specialists
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**
Name: Dawn M Phillips
Office Address: 1109 SE Walton Lakes Drive
Port St Lucie, Florida, 34952
(Zip Code)

10. 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.

Dawn M. Phillips
(Registered agent's signature)

11. 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.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: Joan L. Phillips

Address: PO Box 366 Riverside, PA 17868 N/A

Vice Chairman: N/A

Address: _____

Director: Joan L. Phillips

Address: same as above

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Joan L. Phillips

Address: as above

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Joan L. Phillips
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. JOAN L. PHILLIPS - OWNER
(Typed or printed name and capacity of person signing application)

96 FEB - 11 21 26

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS



COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

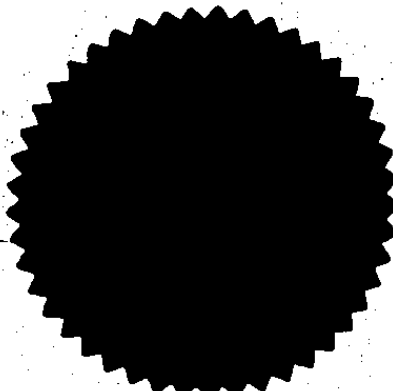
SEPTEMBER 07, 1995

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

COM/PLI, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

SWAL

FILED
SECRETARY OF STATE
DIVISION OF RECORDS
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