

F96000000796

TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section
Division of Corporations

500001706315

-02/05/96--01064--002
*****70.00 *****70.00

W96-2722

SUBJECT: Avalon 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", 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:

Deena M. Balogh
(Name of Person)

Avalon Inc
(Firm/Company)

201 Shaker Rd
(Address)

East Longmeadow MA 01028
(City/State/Zip)

96 FEB 16 PM 1:30

FILED
SECRETARY OF STATE
CORPORATIONS

mtm

Should you need to call someone concerning this matter, please call:

Deena Balogh at (413) 525-9222
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Sec.
Division of Corporations
409 E. Gaines St
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

February 6, 1996

DEENA M. BALOGH
% AVALON, INC.
201 SHAKER RD.
EAST LONGMEADOW, MA 01028

SUBJECT: AVALON, INC.
Ref. Number: W96000002722

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DIVISION OF CORPORATIONS

We have received your document for AVALON, 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 document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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: 996A00005079

Avalon, Inc.

Phone: (413) 525-9222

fax: (413) 525-9229

201 Shaker Road, East Longmeadow, MA 01028

Resolution Of Board Of Directors

Subject: Use Of Fictitious Name In All States Other Than Home State

It has been agreed by unanimous consent that when filing as a foreign corporation we will use the name Avalon, Inc. - MA. This is being done for two reasons, one is that Avalon, Inc. is a very common name. So common that up to this point every state in which we attempted to file under Avalon, Inc. the name was already taken. The other reason is simply for purposes of consistency.

Use of the Fictitious name Avalon, Inc. - MA is Certified by our Secretary as adopted.



Deena M. Balogh,
Secretary - Avalon, Inc.

96 FEB 16 PM 1:30

FILED
SECRETARY OF STATE
COMMONWEALTH OF MASSACHUSETTS

**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. Avalon, Inc.
(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. MA
(State or country under the law of which it is incorporated)
3. 04-3222330
(FEI number, if applicable)
4. February 23 1994
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification by Secretary of State
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.135, F.S.))
7. 201 Shaker Rd, East Longmeadow MA
01028
(Current mailing address)
8. training of hospital staff on behalf of our customers
(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: Penny Koesema
Office Address: 604 64th Court
Palm Beach Gardens, Florida, 33410
(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.

Penny Koesema
(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: Deena Balogh
Address: 347 Parker St. E. Longmeadow MA 01028
Vice Chairman: NA
Address: _____

Director: Deena Balogh
Address: 347 Parker St
E. Longmeadow MA 01028
Director: NA
Address: _____

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

President: Deena Balogh
Address: 347 Parker St
E. Longmeadow MA 01028
Vice President: NA
Address: _____

Secretary: Deena Balogh
Address: 347 Parker St
E. Longmeadow MA 01028
Treasurer: Deena Balogh
Address: 347 Parker St, E. Longmeadow MA 01028

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

13. NA Deena Balogh Pres.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Deena M. Balogh, President
(Typed or printed name and capacity of person signing application)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
93 FEB 16 PM 1:50



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02188

September 25, 1995

To Whom It May Concern :

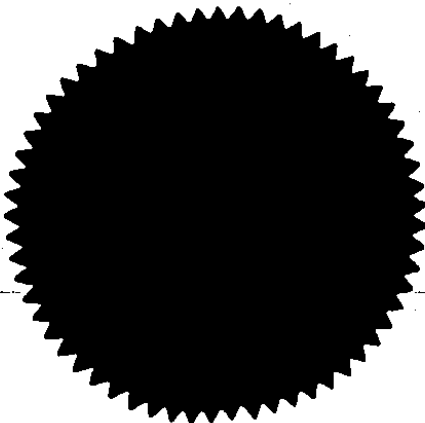
I hereby certify that,

Avalon, Inc.

appears by records of this office to have been incorporated under the General Laws of this Commonwealth on **February 23, 1994.**

I also certify that so far as appears of record here, said corporation still has legal existence.

FILED
SECRETARY OF STATE
DIVISION OF REGISTRATIONS
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In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

NEM

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P. 03

RESOLUTION OF BOARD OF DIRECTORS

Avalon, Inc.

Phone: (413) 525-9222

fax: (413) 525-9229

201 Shaker Road, East Longmeadow, MA 01028

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

July 22, 1996

We have been notified that contrary to what we were originally told by your office, the name Avalon, Inc. is available. In light of this we withdraw our resolution on use of fictitious name and request our name Avalon, Inc. be used.

Cordially,



Deena Balogh
President

8/22

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 AUG 22 AM 8:42