F97000006830

Qualification/Tax Lien Section

To:

Division of Corporations National Healthcare Solutions, Inc. (Name of corporation - must include suffix) 40000Dear Sir or Madam: ****131.25 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. W97-24732 Please return all correspondence concerning this matter to the following: Richard T. Feldmar (Name of Person) National Healthcare Solutions, Inc. (Firm/Company) 100 DeBartolo Place, Suite 100 (Address) Boardman, Ohio 44512 (City/State/Zip) Should you need to call someone concerning this matter, please call: 726-8424 AnnaMarie Napolitan (Name of Person) (Area Code & Daytime Telephone Number) **COURIER ADDRESS: MAILING ADDRESS:** Qualification/Tax Lien Section Qualification/Tax Lien Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314



Department of State

Memorandum Office of the General Counsel

TO:

File

FROM:

Gerard York, Assistant General Counsel

DATE:

December 22, 1997

RE:

National Healthcare Solutions, Inc.

Based on my review of the file and the payments received from the corporation, it is my recommendation that this file be closed. Corporation has paid outstanding report fees from 1996 of \$165.00 and foreign non-qualified penalties of \$ 500.00 assessed at the statutory minimum and wishes to be qualified to do business in the State of Florida. Accordingly, it is recommended corporation be issued a certificate of authority.

/gty

97 DEC 24 AM 8: 35



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 30, 1997

RICHARD I FELDMAN NATIONAL HEALTHCARE SOLUTIONS, INC. 100 DEBARTOLO PLACE, STE 100 BOARDMAN, OH 44512

SUBJECT: NATIONAL HEALTHCARE SOLUTIONS, INC.

Ref. Number: W97000024732

We have received your document for NATIONAL HEALTHCARE SOLUTIONS, in INC. and your check(s) totaling \$131.25. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1165.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 297A00052749

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.

	words or abbrevia	tion; must include the word "INCORPORA" ations of like import in language as will clear partnership if not so contained in the name a	rly indicate that it i	s a corporation	on instead of	a a		
2.	Ohio		3. <u>34-1837</u>		-	-	<u> </u>	
. 1	(State or country under the law of which it is incorporated) (FEI number, if applicable)					e)		
4.	6-03 - 96		Perpetual				<u>-</u>	
	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")							
6.	10-1-96		• • • • • • • • • • • • • • • • • • • •		· .	.,		. ==
	(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)						_	
7.	100 DeBartolo Place, Suite 100					I I	· -	
	DEC.							
Boardman, Ohio 44512 (Current mailing address)						<u></u>		
		V -:: .	•				22 22 25 25 25 25	
8.							<u> </u>	
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Flo						ယ္ ဟ	==	
9.	Name and stre	et address of Florida registered agent:	(P.O. Box or Ma	iil Drop Box	NOT accep	-	Š.	
	Name:	Raul Sanchez de Varona	<u></u>		<u>.</u>			
Of	fice Address: _	1333 S. Miami Avenue, Suite	100 70	3				
	_	Miami,	, Florida, _	33130				
				(Zip code)				

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-

(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: Richard B. White 23845 Main Street, Montrose, Alabama 36559 Address: Vice Chairman: Address: __ Director: :Address: __ B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Richard I. Feldman Address: 6946 Rosewood St. Pittsburgh, PA 15208 Vice President: _____Daniel J. Raudenbush Address: 417 Netherwood Rd. Upper Darby, PA 19082 Secretary: ___Michael A. Suhadolnik ____ Address: 100 DeBartolo Place, Suite 100 Boardman, Ohio 44512 Treasurer: Michael A. Suhadolnik Address: 100 DeBartolo Place, Suite 100 Boardman, Ohio 44512 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Michael A. Suhadolnik, Secretary / Treasurer (Typed or printed name and capacity of person signing application)

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

I, Bob Taft, 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 corporations and miscellaneous filings; that said records show NATIONAL HEALTHCARE SOLUTIONS, INC., an Ohio Corporation, Charter No. 943054, principal location in Youngstown, County of Mahoning, incorporated on June 3, 1996, is currently in GOOD STANDING upon the records of this office.



WITNESS my hand and official seal at Columbus, Ohio this 11th day of September, A.D. 1997

Bob Taft Secretary of State