

F980000003454

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

904-222-1092

CORPORATION(S) NAME

300002562003-2

-06/17/98-01057-014

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

THE CENTERS FOR SLEEP DISORDERS OF AMERICA, INC

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Certified Copy

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Amendment

☐ Dissolution/Withdrawal

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Call if Problem

☐ Will Wait

☐ Merge

☐ Mark

☐ UCC FILING

☐ Other

☐ Change of R.A.

☐ Fictitious Name

☐ CUS/ G/S

☐ After 4:30

☒ Pick Up

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

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FILE STAMPED

Please call Jeff Butterfield
if any problems/questions.

THANKS !

CR2E031 (1-89)

**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. The Centers for Sleep Disorders of America, Inc.
(Name of corporation: the word "INCORPORATED," "COMPANY," or "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. Delaware
(State or country under the law of which it is incorporated)
3. 5-19-98
(Date of Incorporation)
4. PERPETUAL
(Duration)
5. 52-210428
(Federal Employer Identification number, if applicable)
6. UPON QUALIFICATION
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)
7. 3802 Ehrlich Road, Suite 307, Tampa, FL 33624
(Current mailing address)
8. Sleep diagnostic testing
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and addresses of officers and or directors:

A. Directors:

Chairman: Craig Schneider
Address: 4612 Burke Drive
Metairie, LA 70003

Vice Chairman: Albert W. Schiffrin, Esquire
Address: One Liberty Place, Thirty-Second Floor
1650 Market Street, Philadelphia, PA 19103-7393

Director: W. Howard Thompson
Address: One Galleria Boulevard, Suite 1122
Metairie, LA 70001-2082

Director: William Sklar, C.P.A.
Address: 150 Monument Road, Suite 500
Bala-Cynwyd, PA 19004

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

President: Edward Killmer
Address: 3802 Ehrlich Road, Suite 307
Tampa, FL 333624

Vice President: W. Howard Thompson
Address: One Galleria Boulevard, Suite 1122
Metairie, LA 70001-2082

Secretary: Wayne Burger
Address: 4612 Burke Drive
Metairie, LA 70003

Treasurer: Craig Schneider, C.P.A.
Address: 4612 Burke Drive
Metairie, LA 70003

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TALLAHASSEE, FLORIDA

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(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

10. Name and Street address of Florida registered agent:

Name: CT CORPORATION SYSTEM
Office Address: c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
Zip Code

11. 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.

Registered agent's signature:

CT CORPORATION SYSTEM

MARY ALICE ROGERS
(Officer)

Special Assistant Secretary
(Type Name and Title of Officer)

12. 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.

13. Albert W. Schiffrin, Esquire
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

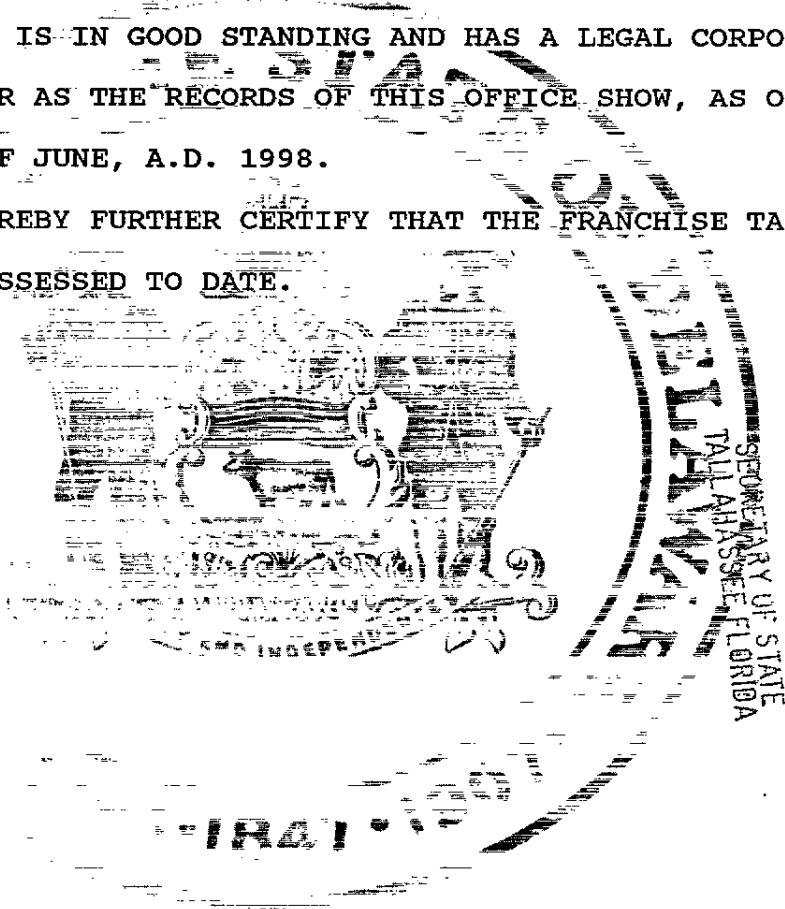
14. Albert W. Schiffrin, Esquire - Vice Chairman
(Name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THE CENTERS FOR SLEEP DISORDERS OF AMERICA, 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 FIFTEENTH DAY OF JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel, Secretary of State

AUTHENTICATION:

2898370 8300

DATE:

9138393

981230466

06-15-98