

#98000004413

Document Number Only

C T CORPORATION SYSTEM

660 East Jefferson Street

Requestor's Name

Tallahassee, Florida 32301

Address

(850) 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

CONS medical corporation

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

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TALLAHASSEE FLORIDA

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DIVISION OF CORPORATION
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| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Fict. Filing | <input type="checkbox"/> Changes of R.A. |
| <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> UCC-1 UCC-3 |
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PLEASE CALL JEFF BUTTERFIELD
IF ANY PROBLEMS/QUESTIONS.

THANKS !

2/8/4/98

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. Lors Medical Corporation

(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. North Carolina

(State or country under the law of which it is incorporated)

3. 561238538

(FEI number, if applicable)

4. May 10, 1979

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. February 1, 1998

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))

7. 544 Julian Allsbrooke, Roanoke Rapids, North Carolina 27870

(Current mailing address)

8. Delivery of home medical services for the VA Medical Center patients
(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:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

C T Corporation System


(Registered agent's signature) (Officer)

Allan Farnell, Assistant Secretary

(Type Name and Title of Officer)

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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:

A. DIRECTORS

Chairman: Donald R. Lynch
Address: 544 J.R. Allsbrooke Rd.
Roanoke Rapids, N.C. 27870

Vice Chairman: Paul W. Heaton, Sr.
Address: 544 J.R. Allsbrooke Rd.
Roanoke Rapids, N.C. 27870

Director: Richard McClean
Address: First Union Tower
Greensboro, N.C. 21962

Director: Russell Myers
Address: First Union Tower
Greensboro, N.C. 21962

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B. OFFICERS

President: Donald Lynch
Address: 544 Julian Allsbrooke Road
Roanoke Rapids, North Carolina 27870

Vice President: Paul W. Heaton
Address: 544 Julian Allsbrooke Road
Roanoke Rapids, North Carolina 27870

Secretary: Lisa M. Lynch
Address: 544 Julian Allsbrooke Road
Roanoke Rapids, North Carolina 27870

Treasurer: Dorothy A. Boehm

Address: 544 Julian Allsbrooke Road

Roanoke Rapids, North Carolina 27870

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

13. *Dorothy Boehm*
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dorothy Boehm, Treasurer
(Typed or printed name and capacity of person signing application)

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STATE OF NORTH CAROLINA



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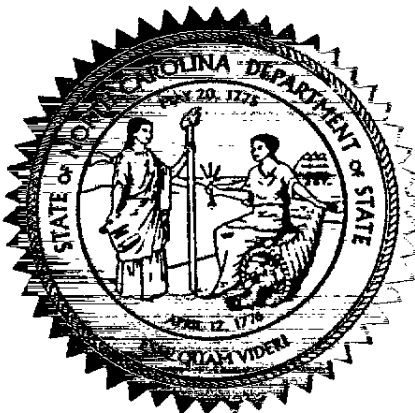
CERTIFICATE OF EXISTENCE

I, **ELAINE F. MARSHALL**, *Secretary of State of the State of North Carolina*, do hereby certify that

LORS MEDICAL CORP.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 10th day of May, 1979, with its period of duration being perpetual.

I **FURTHER** *certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.*



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 29th day of July, 1998.

Elaine F. Marshall

Secretary of State

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