

Document Number Only

F98000004853

C T Corporation System.

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

City

State

Zip

Phone

CORPORATION(S) NAME

300002626693--9

-08/27/98--01056--015

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

Home Medical of America, Inc

RECEIVED
DIVISION OF CORPORATION

98 AUG 27 AM 11:29

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Amendment

☐ Merger

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Limited Liability Partnership

☐ Fictitious Name

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

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THANKS

JOEY

8/27/98

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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. Home Medical of America, 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. Delaware
(State or country under the law of which it is incorporated)
3. 52-2101177
(FEI number, if applicable)
4. May 21, 1998
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))
7. 55 Carnegie Plaza, Cherry Hill, New Jersey 08003

(Current mailing address)
8. Home health care
(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)

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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

Korri A. Behler

(Registered agent's signature) (Officer)

Special Assistant Secretary

(Type Name and Title of Officer)

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: Craig W. Porter

Address: 55 Carnegie Plaza

Cherry Hill, New Jersey 08003

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Craig W. Porter

Address: 55 Carnegie Plaza

Cherry Hill, New Jersey 08003

Vice President: _____

Address: _____

Secretary: Jack N. Brown

Address: 55 Carnegie Plaza

Cherry Hill, New Jersey 08003

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TALLAHASSEE, FLORIDA


Treasurer: Jack N. Brown

Address: 55 Carnegie Plaza

Cherry Hill, New Jersey 08003

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

13.

 7/10/98
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Jack N. Brown, Secretary

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

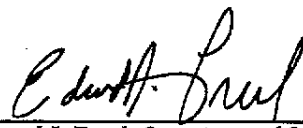
State of Delaware
Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOME MEDICAL 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 JULY, A.D. 1998.

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

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TALLAHASSEE, FLORIDA




Edward J. Freel, Secretary of State

2899130 8300

AUTHENTICATION:

9197065

981274031

DATE:

07-15-98