

F99000001805

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: SIMS LEVEL 1, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

000002829290--2
-04/05/99--01105--005
*****70.00 *****70.00

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:

KAREN WINFIELD
(Name of Person)

SIMS LEVEL 1, INC
(Firm/Company)

160 WEYMOUTH ST.
(Address)

ROCKLAND, MA 02370
(City/State/Zip)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 APR -6 AM 10:28

FILED

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

KAREN WINFIELD at (781) 878-8011
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
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

4/7/99

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. SIMS LEVEL 1, 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. MASSACHUSETTS 3. 04-2915838
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. OCT. 5, 1989 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 2/1/99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 160 WEYMOUTH ST.
ROCKLAND, MA 02370
(Current mailing address)

8. SALE OF MEDICAL EQUIPMENT AND SUPPLIES
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

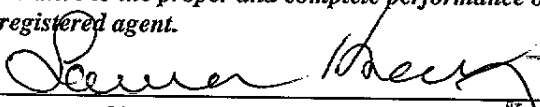
Name: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND RD.
PLANTATION, Florida, 33324
(Zip code)

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TALLAHASSEE, FLORIDA

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.


(Registered agent's signature) **WILLIAM H. KRENTZ**
CLERICAL ASST. SECRETARY

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: GEORGE KENNEDY

Address: 765 FINCHLEY RD
LONDON NW11 8DS, UK

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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

President: HOWARD DONNELLY

Address: 160 WEYMOUTH ST.
ROCKLAND, MA 02370

Vice President: _____

Address: _____

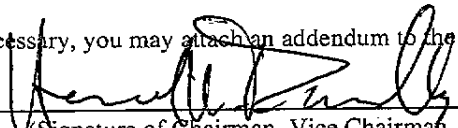
Secretary: MICHAEL J. PEDRICK

Address: 2000 ONE LOGAN SQ.
PHILADELPHIA, PA 19103

Treasurer: ALAN CANTELO

Address: 765 FINCHLEY RD.
LONDON NW11 8DS, UK

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

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

14. Howard Donnelly President
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

March 23, 1999

TO WHOM IT MAY CONCERN:

I hereby certify that the records of this office show that
Level 1 Technologies, Inc.

was incorporated under the General Laws of this Commonwealth on
October 5, 1989

I further certify that by articles of amendment filed on October 20, 1995
the name of said corporation was changed to

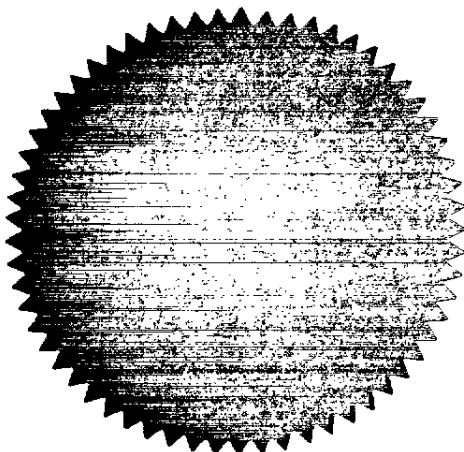
SIMS Level 1, Inc.

and said corporation still has legal existence.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

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JM
MGL Chapter 156B, § 83A provides that certain consolidations and mergers may be filed with the Division within thirty days after the effective date of the merger or consolidation.