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FOREIGN LIMITED LIABILITY COMPANY

CardioSom LLC

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2/10/2005



February 11, 2005

C T CORPORATION SYSTEM

TALLAHASSEE, FL 32301

SUBJECT: CARDIOSOM LLC

REF: W05000007276

We received your electronically transmitted document. Rowever, the document has not been filed. Please make the following corrections and refex the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6913.

Diane Cushing Document Specialist FAX Aud. #: H05000035458 Letter Number: 805A00009770

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608-503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

١.	CardioSom LLC	_
	(Name of foreign limited liability company)	
2. <u> </u>	Indiana 3. 11-3733629 Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	-
4,	11/16/2004 (Date of Organization) 5. 12/31/2054 (Duration: Year limited liability company will cease to exist or "perpetual")	-
6.	Anticipated date is:UN9 /, 2005 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	-
7.	615 West Carmel Drive, Suite 100, Carmei, Indiana 46032	اړ مو
:	SECR LLA	
	(Street address of principal office)	C. 100.000 '
8,	If limited liability company is a manager-managed company, check here	
9.	The name and usual business addresses of the managing members or managers are as follows:	
	LLC is member-managed	_
	sole member: Dormir LLC, 615 West Carmel Drive, Suite 100, Carmel, Indiana 46032	-
		-
		-
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign la translation of the certificate under oath of the translator must be submitted.)	
11	. Nature of business or purposes to be conducted or promotes in Florida: Management of diagnostic	_
	sleep centers and related activities	.
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
	Kevin P. Greisl, President and COO	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	e of the Limited Liabili	ity Company is:			
2. The name	e and the Florida street	address of the registered	agent and office		•
s 94 T		C T Corporation System		SECF FALL/	285
•		(Name)		RETARY AHASSE	
	c/o C T Corr	poration System, 1200 South l	Pine Island Road		
•	Florida	street address (P.O. Box NO	(Acceptable)	<u>:</u>	>
1gs y	•			~ 5°4	ਨ
٠	Plantation,	FL	33324	금을	π Θ
w 4		(City/State/Zip)		. > ' '	N

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

By: CT Corporation System CONTAINE BRYAR

By: SPECIAL ARRISTART SECRETARY

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

CARDIOSOM LLC

drily filed the requisite documents to commence business activities under the laws of State of Indiana for November 16, and was in existence or authorized to transact business in the State of Indiana on February 07, 2005.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Seventh Day of Fehrnary, 2005.

TODD ROKITA, Secretary of State

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