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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: Wrong application submitted. Application amended and correct number assigned 5/23/05. Unable to make contact with appropriate party."

Office Use Only



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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: New Viasys Holdings, LLC. (Name of corporation - must include suffix)
Dear Sir or Madam:
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:
Shari S. Elessar
(Name of Person)
20 Lake Wire Drive
Lakeland, Florida 33815
(City/State and Zip code) City/State and Zip code) For further information concerning this matter, please call:
SWILE CSSON (803) 1007-9988 (Area Code & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bigcup \\$78.75 Filing Fee & B78.75 Filing Fee & Certificate of Status Certified Copy Certified Copy 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
1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp.")
1. CIM VIOSVS TO MINOS (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp, "Inc," "Co," or "Corp.")
(Enter hame of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida
2. State or country under the law of which it is incorporated) (FEI number, if applicable)
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. (Date of incorporation) 5. (Duration: Year corp. will cease to exist or "perpetual")
A I /A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine benalty liability)
7. 26 Lake Wire Drive, Cakeland, +13385
210 10KP Wive Drive 10K10W F133815
20 Lake Wive Drive, Lakeland, +133815 (Current mailing address)
(Cartell maning address)
8. Any Lawful Purpose
(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 NOT acceptable)
Name: Smri S. Elessar
Plataka Ma
Office Address: 2010KE WIVE DV
Lakeland, Florida 5505
(City) (Zîp code)
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.

- 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 business addresses of officers and/or directors:

A. DIRECTORS		
Chairman:		
Address:		
Se	e phached	The Part of the Pa
Vice Chairman:	\	The state of the s
Address:		- SS 2
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Director:		2004
	-	9 <u>0</u> ,
Director:		771
		74.1
B. OFFICERS		,
President:	Harbed	
·		
		
Address:		
		<u> </u>
Secretary:		
Address:		
Treasurer:		··
Address:		
NOTE: If necessary you may atta	ach an addendum to the application listing additions	al officers and/or directors.
		•
13. (Signature o	f Director or Officer listed in number 12 of the app	lication)
14Shor	rinted name and capacity of person signing applic	
(Typed or	printed name and capacity of person signing applic	cation)

Current Officers

Lance McNeill, President 26 Lake Wire Drive Lakeland, Florida 33815

Steven E. Palmer, Vice President and Treasurer 26 Lake Wire Drive Lakeland, Florida 33815

Keith Hulbert, Vice President 26 Lake Wire Drive Lakeland, Florida 33815

Shari Elessar, Secretary 26 Lake Wire Drive Lakeland, Florida 33815

Andrea Jennings, Assistant Secretary 26 Lake Wire Drive Lakeland, Florida 33815

Board of Directors

Mel Harris, Director Preferred Employers Holdings, Inc. 10800 Biscayne Blvd., 10th Floor Miami, Florida 33161

Doug Berman, Director H.I.G. Capital 1001 Brickell Bay Drive 27th Floor Miami, FL 33131



Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEW VIASYS HOLDINGS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JULY, A.D. 2004.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3263484

DATE: 07-29-04

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