M0800005179

(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:
L. SELLERS NOV 25 2008 EXAMINER

Office Use Only



900138102489

11/24/08--01036--010 **130.00

SEORG DAYS OF STALE

and the same of th

COVER LETTER

TO: Registration Section

Division of Corporations	
SUBJECT: MEDICALMINDS, LLC	
	ted Liability Company)
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited
Please return all correspondence concerning this m	atter to the following:
AZINA KANJI	
. (Nai	me of Person)
FINANCIAL ACCOUNTING	S SERVICES, PLC
(Fire	n/Company)
730 W. COLONIAL DR.	
	(Address)
ORLANDO, FL 32804	
(City/Sta	ite and Zip Code)
For further information concerning this matter, plea	ase call:
AZINA KANJI	_{at (} 407 ₎ 423-2371 X112
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$\$130.00 \text{ Filing Fee & Certificate of}\$	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy

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

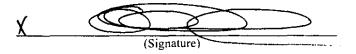
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. MEDICALMIN		ist includ	e "Limited Liability Company," "L.L.C	" or "[[C ")
(Name of Foreign L	Similed Elability Company, me	ist metac	e Emilied Blasting Company, B.B.C.	or bbc. y
	r managing members adopting		e of transacting business in Florida and a nate name. The alternate name must incl	
OHIO		3.	74-3213826	
(Jurisdiction under the l company is organized)	aw of which foreign limited lia	bility	(FEI number, if applications of the second	able)
4. APRIL 20, 200	07	5.	PERPETUAL	
(Date of	Organization)		(Duration: Year limited liability comexist or "perpetual")	pany will cease to
_{5.} JANUARY 01				
	(Date first transacted busines (See sections 608.501 & 608.5	ss in Flor 502 F.S.	ida, if prior to registration.) to determine penalty liability)	
_{7.} 8328 LAKE B	URDEN CIRCLE			
WINDERMER	RE, FL. 34786			
	(Street A	ddress o	f Principal Office)	
8. If limited liability of	company is a manager-ma	naged o	company, check here 🗸	
9. The name and usua	al business addresses of th	e mana	ging members or managers are as	s follows:
SEJAL P. PA	TEL			
8328 I AKE B	URDEN CIRCLE			
	·····	 	. •	
WINDERMER	RE, FL. 34786			
10. Attached is an original o	certificate of existence, no more t	han 90 da	ays old, duly authenticated by the official 1	having custody of records in
	w of which it is organized. (A plunder oath of the translator must		is not acceptable. If the certificate is in a	foreign language, a
			DUVELO	IAN SERVICES
11. Nature of busines	s or purposes to be condu	cted or	promoted in Florida: TTT Sto	- INTOLITY OLD
	X SS			86 80
			horized representative of a memb	er.
			 the execution of this document constitutes that the facts stated herein are true.) 	多主 2
	SEJAI	LPP	ATEL	Fig.
	Typed or r	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.

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, Florida Statutes.



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

08 NOV 24 AM 8: 05

United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show MEDICALMINDS, LLC, an Ohio Limited Liability Company, Registration Number 1694801, was organized within the State of Ohio on April 20, 2007, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 13th day of November, A.D. 2008

Ohio Secretary of State

Validation Number: V2008317N84E0A

JENNIFER BRUNNER

OHIO SECRETARY OF STATE

Home | About | Businesses | Voter Servicus | Candidates | Bediens & Buillot Issues | Citier Percieds | Better Lives | Voting Rights Institute | Media Center

Par The Mark PAGNOTING BUSINESS GROWTH !! printer friendly pore

Business Fridge

Nurne Availability

Search Filings

Tips, How to Perform a Search

Filing Forms / Fee Schedule

Nonprofit Organizations

Statutory Agents

Tradomarks & Service Marks

Certificates of Good Standing

Expedite Service

Prepayment Accounts Business Publications

Request a Business Report

File Orline

Search Filings

UCC Filing Forms / Fee Schedule

Revised Article 9

FREQUENCE - ASKED OUR STICKS

Phone (614)-465-3010 Toll Free (877) 767 3453 E mail us

Certificates Of Good Standing

- Othain a Constrate of Good Standing
- Caeck Validación Number

Business entities true certificates of cost standard to prove they are incorporated and authorized to do bisiness in Onto-Tire good standing status aignified an enaby is current with the bing requirements of the secretary of state a office, as well as being current with the writty's corporate franchise taxes. During the financing process, banks will often require a certificate of good standing from a business. The secretary of state's ordine system allows users to request and print a certificate in minutes, saving Ohio businesses valuable time

Automated Service Major features include

- Requestion "instant" cert hospion (a) more: Active pesiness entities. Obtain a Certificate of Good Standing.
- View and print out your Cnit feate at your own P.C.
- Receive continuation of your transuition after priying the 85 fee using MasterCard, VISA, Discriver of American

Express

Grando von friedring institution or group parameter and the parameter in an institution of the certific transfer and the parameter in a control of the certific transfer and the parameter indicates the certific transfer in the parameter in th _ Good Standing

Additional Information.

- Cortifications are valid for 60 days
- You may submit up to ten (10) o quasts a coph session
- Restricts to Bouross Services to print the confliction can be comprehens a final beach wind on the Wend to the Secretary of State for Printing, button on the hippropriate survey.
- Online Certificates of Good Standing include
 - O. Certificates of Good Standing for most foreign and domestic corporations
 - () Full Energ & Effect Certification for Tracte Names, Existence Hamps, 117 9, 119's and 117's
- Requests for certificates not currently offered online can still be filed with the Secretary of State by authoriting the appropriate form to

Secretary of State. Business Services Division P.O. Box 130 Columbias Cirt 43216

Or deliver to

Societary of State, Business Dervices Division 180 E. Broad Street, Suite 103 Columbus OH 43215

- Cack here to obtain a copy of a Request for Certificate of Good Standing & Copy Request.
- Able to create and use a Prepayment Account for the contribution fee
- For other questions and information, you may did to little 6-1-877-SQS-PRE

the first and control of data services for a control of the first and a services of the control of the first and t Privacy (Directions) Contact Us a State of Chie Cremen Days

Register with our Web site and receive the lateral news and vesing rights upriates from the Secretary of State s office. Click here to unklate your profile or to sign up-

Archived Newsletters

Dates / Deadlines

November 2008							
Sun	Mon	Tue	Wed	Thu	Fn	Sət	
26	2?	28	29	30	31	1	
2	ر د	4	5	б	1	8	
9	10	11	12	13	14	15	
16	17	ı E	19	ŻΨ	21	22	
23	24	25	26	27	28	29	
30	. :	7	3	4	•	6	