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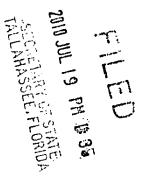
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C. LEWIS

JUL 20 2010

EXAMINER

DAVID A. ISON
LAW OFFICES

f0 Village Pointe Drive P.O. Box 1108 Powell, Ohio 43065-1108 Voice (614) 336-3083 Fax (614) 336-3093 Email dave.isonlaw@gmail.com

July 16, 2010

Division of Corporation Registration Section PO Box 6327 Tallahassee, FL 32314

RE: RN Medical, LLC

Dear Sir or Madam:

Enclosed are the original and a copy (to be date-stamped and returned in the enclosed envelope) of the Application By Foreign Limited Liability Company For Authorization To Transact Business in Florida. I have included an original Good Standing Certificate which we received my mail yesterday from the Ohio Secretary of State. A check in the amount of \$130 is enclosed to cover the filing fee and certificate of status. Please feel free to call with any questions.

Sincerely,

Barb Case Adm. Assistant

#### **COVER LETTER**

TO:	Registration Section Division of Corporati	ons					
SUBJI	ECT:	R	N MED	ICAL, LLC			
		N	ame of Li	mited Liability Com	pany	-	
						ransact Business in Florie ity company to transact b	
Please	return all corresponden	ce concerning this t	natter to th	ne following:			
			D	avid A. Ison			
			N	lame of Person			_
	<del></del>	L:		es of David A.	Ison		_
			F	irm/Company			
		10 Villa	age Poir	nte Drive, PO B	3ox 110	8	
				Address			_
			Powe	ell, Ohio 43065			
				State and Zip Code	101.01		_
		,	tave iso	niaw@gmail.co	nn.		
	-	E-mail address:	(to be use	d for future annual i	report not	ification)	<del></del>
For fur	ther information concer	ning this matter, plo	ase call:				
		Dave Ison	·····	at ( 614	_)	336-3083	<u> </u>
Name of Person		Are	ea Code & Daytime	Telephon	e Number		
	MAILING ADDRES Division of Corporati Registration Section P.O. Box 6327 Tallahassee, FL 3231	ons	Division Regist Cliftor 2661 F	ET ADDRESS: on of Corporations ration Section i Building Executive Center Cir assee, FL 32301	rcle		
Enclo	sed is a check for th	_	ng Fee &	\$155.00 Filin Certifi	ng Fee & ed Copy	\$160.00 Filing Fee, of Status & Cer	

### 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 LIARILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

Lazvi	INDIVIDUAL CONTROL ON THE STATE OF THE STATE
1	RN Medical, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	QLaser - Florida, LLC
TC.	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written
on	sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability npany," "L.L.C," "LLC.")
2	Ohio 3 27-1519962
(. c	Ohio  Jurisdiction under the law of which foreign limited liability ompany is organized)  3. 27-1519962  (FEI number, if applicable)
4.	November 6, 2009  (Date of Organization)  5. perpetual (Duration: Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
5	
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)  8391 SE 174th Clifton Place, The Villages, FL 32162  (Street Address of Principal Office)  (Street Address of Principal Office)  The name and usual business addresses of the managing members or managers are as follows:
7	8391 SE 174th Clifton Place, The Villages, FL 32162
	(Street Address of Principal Office)
•	(Street Address of Principal Office)
3.	If limited liability company is a manager-managed company, check here
) '	The name and usual business addresses of the managing members or managers are as follows:
•	
	Robert Norris, GM, 4389 Beech Wood Loop, Dublin, OH 43016
ın	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
	unsdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
	slation of the certificate under oath of the translator must be submitted.)
ı <b>1</b>	Nature of business or purposes to be conducted or promoted in Florida: Medical Device Sales
	Nature of business of purposes to be conducted of promoted in Plotida.
-	
	Kid I / / /
	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.)
	Robert T. Norris
	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 of the Limited Liability Company is:	
RN Medical, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
QLaser- Florida, LLC	
2. The name and the Florida street address of the registered agent and office are:	
	700
Don Beegle	
(Name)	一致して
	المام مع رورا
8391 SE 174th Clifton Place	是是它
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
The Villages, 편让 32162	7.
City/State/Zip	_

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)

### 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 RN MEDICAL, LLC, an Ohio For Profit Limited Liability Company, Registration Number 1894325, was organized within the State of Ohio on November 06, 2009, 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 8th day of July, A.D. 2010

Ohio Secretary of State

Validation Number: V2010189JAFA1E