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Foreign Limited Liability Company M&DICAL EQUIPMENT AND SUPPLIES OF AMERICA, LLC

Certificate of Status	0
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Help

B. BOSTICK

JUL 2 0 2011

EXAMINER

7/19/2011

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

IN COMPLIANCE WITH SECTION BURSE, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN THATFOLLIBRI BY COMPANY TO TRANSACT RESIDENCE INVITES STATE OF ET OPICA.

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")				
		of transacting business in Florida and attach a cop- tale name. The at armate name must include "Limite		
Georgia	3.	(Fill number, if applicable)		
Jurisdiction under the law of which foreign limits company is organized)	g lightlify	(Fist number, if applicable)		
07/14/2011	5 .	Perpetual		
(Date of Organization)		(Duration: Yes: limited liability company will co exist or "purpe: sall")	ase to	
N/A				
(Dute first transacted bus		ida, if prior to registration.) o determine penal y liability)		
706 South Harbor City Bivd., Suite 240, Melbour	me, Florida 3.	2901		
(Stre	et Address of	Principal Office)	24 Cu.	
If limited liability company is a manager-	managed c	ompany, check here 🔀	LAHAS	
The name and usual business addresses or	f the manaç	ging members or managers are as follows:	(2) 	
Deborah P. Kennody, 706 South Harbor City Blv.	d., Suits 240,	Melbourne, Florid: 32901		
			물론	
			<u></u>	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 o. 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.

If unavailable, the alternate to be used in the state of Florida is: 2. The name and the Florida street address of the registered agent and office are:				
•		(Name)		
	1200 South Pine Island Road	*	TAHANA I	
	Florida Street Addre	ess (P.O. Box NOT ACCEPTABLE)	<u> </u>	
	Plantation	FL 33324	P1 8:	
		City/State/Zip		
liability con	n named as registered agent and to spany at the place designated in thi gree to act in this capacity. I furthe	s certificate, I hereby accept the a	> above stated limited appointment as registered	

(Signature) Danny Verdecchia, Jr. Asst. Secretary

> \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Elegistered Agent

Certified Copy (optional)
Certificate of Status (optional) \$ 30.00

5.00

Control No. 11053410

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

MEDICAL EQUIPMENT AND SUPPLIES OF AMERICA, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 07/14/2011 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 19th day of July, 2011

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 7616689-1 Reference: Verify this certificate online at http://corp.sos.state.gu.us/corp/scskb/verify.asp