Filing Fee: \$50.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

ECRETARY OF STORE OR STORE OR ATTOMS (

ID Number: 000865280

CERTIFICATE OF CORRECTION

Section 9: Number of Shares section asks the corporation is to list the number of shares at and the corporation listed the number of shares issued instead of the shares authorized. To of shares authorized is 1000, not 100. 5. The corrected portion of the document states as follows: Section 9: Number of Shares section has been corrected to reflext the true number of shares authorized which is 1000. 6. The document attached to this certificate is the corrected document. 7. This Certificate of Correction shall be effective upon filing unless a specified date is provided whith than the 90 th day after the date of this filing Under penalty of perjury, I declare and examined this Certificate of Correction accompanying attachments and that all states herein are true and corrections.	s, as amended the							
3. The document being corrected was originally filed on Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or a Section 9: Number of Shares section asks the corporation is to list the number of shares are and the corporation listed the number of shares issued instead of the shares authorized. To of shares authorized is 1000, not 100. The corrected portion of the document states as follows: Section 9: Number of Shares section has been corrected to reflext the true number of shares authorized which is 1000. The document attached to this certificate is the corrected document. This Certificate of Correction shall be effective upon filing unless a specified date is provided whithan the 90 th day after the date of this filing Under penalty of perjury, I declare and examined this Certificate of Correction accompanying attachments, and that all states herein are true and corrected.								
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FILED examined this Certificate of Correction accompanying attachments, and that all states therein are true and correction accompanying attachments.	ich shall be no later							
Date: " - 1 \(\lambda - 1\) \(\lambda - 1\) \(\lambda \lambda \)	on, including any							
Signature of Applerized Officer of the	e Corporation							
A A 11.31A Mario Garica, Jr President & CEO Type or Print Name of Authorized	105							

Form No. 113 Revised: 12/05 Filing and License Fee: \$310.00 minimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 148 W. River Street Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

SECRETARY OF STATE CORPORATIONS DIV

CO	rpora	nt to the tion here wing sta	by applies for a Certificat	i.2-1405 of the General Le of Authority to transact	Laws of Rhode Island, 1956, as amended, the undersigned foreign business in the State of Rhode Island, and for that purpose submits			
1.	The name of the corporation is Electrostim Medical Services, Inc.							
2.	Florida							
3.	The name, if different, which it elects to use in Rhode Island is:							
	(a)	If the I	corporation does not contain the word "corporation", "company", en list the name of the corporation with the addition of one of the					
	(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation we qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with the application:							
4.	The	date of	its incorporation is	1995	and the period of its duration is Perpetual			
5.	3504 Cragmont Drive Suite 100 Tampa El 33619-8300							
6.	The address of its proposed registered office in Rhode Island is 450 Veterans Memorial Parkway Suite 7A							
		(Street Address, not P.O. Box)						
	East Providence			, RI <u>02914</u> (Zip Code)	and the name of its proposed registered agent in Rhode Island at			
			(City/Town)					
	that address is National Register Agents, Inc. (Name of Agent)							
7.	The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:							
••	Electric stimulation devices for pain and muscle re-education. Bone Growth Stimulators for							
	non union fractures. Diabetic Pump for the treatment of Type 1 Diabetes.							
8.	(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).							
			<u>Name</u>		<u>Address</u>			
	Dire	ctor	Mario Garcia, Jr.		3504 Cragmont Drive Suite 100 Tampa, FL 33619-8300			
	Dire	ctor						
	Dire	ctor						

Director

			<u>Name</u>			Address			
	Pre	sident	Marion Garcia, Jr.		3504 Cragr	nont Drive Suite 100 Tampa, FL 33619-8300			
	Vic	e President							
		asurer		•					
		cretary							
	-	, otal y							
		e aggregate numbe I series, if any, with		authority to issue; i	temized by classe	es, par value of shares, shares without par value			
		Number of Shares		ass	<u>Series</u>	Par Value or Statement that Shares are without Par Value			
	100			<u>Class</u> Common	<u>ocnes</u>	1.00000			
		\$ 1,100,000.00							
0.	(a)	following year, wh	nerever located.	An estimate of the	e value of all pr	operty to be owned by the corporation for the			
	(b)	\$ 5,000.00		An estimate of the	value of the co	rporation's property to be located within Rhode			
		Island during the f							
	(c)	c) % = An estimate, expressed as a percentage, of the proportion that the estimated value of the property the corporation to be located within this state during the following year bears to the value of all property of the corporation be owned during the following year, wherever located. {divide (b) by (a) and multiply by 100 to obtain the percentage}							
1.	(a)	\$_30,000,000.00		An estimate of the	gross amount o	f business to be transacted by the corporation			
		during the followin	g year.						
	(b)	\$ 94,000.00 or from places of b	= ousiness in Rhode Islan			business to be transacted by the corporation a			
	(c)	0.31 % = An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year. {divide (b) by (a) and multiply by 100 to obtain the percentage}							
2.		nis application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the ws of which it is incorporated.							
3.	This	Application for Ce	rtificate of Authority sha	ıll be effective upon	filing unless a sp	ecified date is provided which shall be no later			
	thar	the 90th day after	the date of this filing _		1				
.	. 01	1/27/2014		Applica	ation for Certification for Ce	r, I declare and affirm that I have examined this ate of Authority, including any accompanying all statements contained herein are true and			
ate	:	 ,			Signature of	if it prized Officer of the Corporation			
				Mario	Garcia, Jr Pre	sident & CEO			

Type or Print Name of Authorized Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

