Filing and License Fee: \$310.00 minimum

1. The name of the corporation is Ultra Medical Supply, Inc.



## 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

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

2.	It is incorporated under the laws of New York				
3.	The name, if different, which it elects to use in Rhode Island is:				
	(a)	If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company" "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:			
	(b)	If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation wind qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:			
4.	The	date of it	s incorporation is July 18, 1997	and the period of its duration is Perpetual	
5.	The	address	of its principal office is 1685 E. 21st Str	reet, Brooklyn, NY 11210	
6.	The	address	of its proposed registered office in Rhod	de Island is 222 Jefferson Blvd2nd Fl	
				(Street Address, not P.O. Box)	
	wa	TWICK	, RI <u>0</u> (City/Town)	o2888 and the name of its proposed registered agent in Rhode Island at (Zip Code)	
	that address is United Corporate Services, Inc.				
				(Name of Agent)	
7.	The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
	Provider of durable medical equipment and supplies.				
8.	(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state of country of which it is incorporated).				
			<u>Name</u>	<u>Address</u>	
	Dire	ctor	Simcha Hyman	1685 E. 21st Street, Brooklyn, NY 11210	
	Dire	ctor			
Director FILED			FILED		
	Dire	ctor		— JAN 2 9 2015	
	21 11 0 20				JAN 20 2010
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(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated). <u>Name</u> <u>Address</u> Simcha Hyman 1685 E 21ST Street, Brooklyn, NY 11210 President Simcha Hyman 1685 E 21ST Street, Brooklyn, NY 11210 Vice President Simcha Hyman 1685 E 21ST Street, Brooklyn, NY 11210 Treasurer Simcha Hyman 1685 E 21ST Street, Brooklyn, NY 11210 Secretary The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is: Par Value or Statement that Number of Shares <u>Series</u> Shares are without Par Value Class 200 Common No Par Value 10. (a) \$\_ = An estimate of the value of all property to be owned by the corporation for the following year, wherever located. (b) = An estimate of the value of the corporation's property to be located within Rhode Island during the following year. (c) \_% = An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. (divide (b) by (a) and multiply by 100 to obtain the percentage) 11. (a) \$\_40,000 = An estimate of the gross amount of business to be transacted by the corporation during the following year. = An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year. \_% = 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} 12. This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated. 13. This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing \_ Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct. Date: 1-26-15 Signature of Authorized Officer of the Corporation Simena Hyman, President
Type or Print Name of Authorized Officer

## State of New York Department of State State

I hereby certify, that the Certificate of Incorporation of ULTRA MEDICAL SUPPLY, INC. was filed on 07/18/1997, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of January two thousand and fifteen,

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Anthony Giardina
Executive Deputy Secretary of State

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SECRETARY OF STATE CORPORATIONS DIV

I, NELLIE M. GORBEA, 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:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

