

Filing Fee: \$150.00
License Fee: \$15.00 minimum (§7-1.1-124)

ID Number:

101956



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.1-103 of the General Laws, 1956, as amended, the undersigned 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:

1. The name of the corporation is MOBILE INSTRUMENT SERVICE & REPAIR, INC. (Ok)
2. It is incorporated under the laws of OHIO
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 will 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 its incorporation is OCT 31, 1988 and the period of its duration is ETERNAL

5. The address of its principal office in the state or country under the laws of which it is incorporated is _____

333 WATER AVENUE, BELLEFONTAINE, OHIO 43311-1777

6. The address of its proposed registered office in Rhode Island is SUITE 900, 170 WESTMINSTER STREET
(Street)

PROVIDENCE, RI 02903 and the name of its proposed registered agent in Rhode Island at
(City/Town) (Zip Code)

that address is CORPORATION SERVICE COMPANY

7. The specific purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

SHARPEN AND REPAIR HAND HELD SURGICAL INSTRUMENTS, SCOPES, AND POWER EQUIPMENT FOR HOSPITALS, DOCTORS, ETC.

8. The names and respective addresses of the directors and officers are:

Name

Address

| | | |
|----------------|------------------------|--|
| Director | _____ | _____ |
| Director | _____ | _____ |
| President | <u>DWIGHT E. REED</u> | <u>9264 HICKORY LANE, HUNTSVILLE, OHIO 43324</u> |
| Vice President | <u>ANNETTE REED</u> | <u>3921 GLENHURST DRIVE, SMYRNA, GA 30080</u> |
| Secretary | <u>CHARLES D REED</u> | <u>1601 PEMBERTON DRIVE, UPPER ARLINGTON, OHIO 43221</u> |
| Treasurer | <u>CHARLES D. REED</u> | <u>1601 PEMBERTON DRIVE, UPPER ARLINGTON, OHIO 43221</u> |

9. 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:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value or Statement that Shares are without Par Value</u> |
|-------------------------|--------------|---------------|---|
| 1,000 | COMMON | | \$1.00 |

10. The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

| <u>Number of Shares</u> | <u>Class</u> | <u>Series</u> | <u>Par Value or Statement that Shares are without Par Value</u> |
|-------------------------|--------------|---------------|---|
| 480 | COMMON | | \$1.00 |

11. (a) An estimate of the value of all property to be owned by the corporation for the following year, wherever located, is
\$ 3,600,000.00.

- (b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year is
\$ 0.

- (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 0 % [divide (b) by (a) and multiply by 100 to obtain the percentage].

12. (a) An estimate of the gross amount of business to be transacted by the corporation during the following year is
\$ 10,000,000.00.

- (b) 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 is \$ 8,000.00.

- (c) 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 0 % [divide (b) by (a) and multiply by 100 to obtain the percentage].

13. This application is accompanied by certified copies of its articles of incorporation and all amendments thereto, duly authenticated by the secretary of state or other authorized officer of the jurisdiction of its incorporation.

Dated JULY 27, 19 98

MOBILE INSTRUMENT SERVICE & REPAIR, INC.
(Exact Corporate Name of Corporation Making Application)

By Dwight E. Reed
☒ President or ☐ Vice President (check one)

By Charles D. Reed
☒ Secretary or ☐ Assistant Secretary (check one)

FILED

JUL 30 1998

By MD 208586

STATE OF OHIO
COUNTY OF LOGAN

In BELLEFONTAINE, on this 27TH day of JULY, 19 98, personally appeared before me
DWIGHT E. REED, an officer of the corporation, who, under oath, verified that the
information contained in this Application is true and accurate.

Pam Wasson
Notary Public
My Commission Expires: 9-19-99

PAM WASSON

60433-1397

Form ARF, August 1983
Prescribed by Sherrod Brown
Secretary of State

APPROVED

By LO
Date 10-21-83
Amount 1700

Articles Of Incorporation

(Under Chapter 1701.01 et seq.)
Profit Corporation

The undersigned, a majority of whom are citizens of the United States, desiring to form a corporation, for profit, under Sections 1701.01 et seq. of the Revised Code of Ohio, do hereby certify:

FIRST. The name of said corporation shall be Mobile Instrument Service & Repair, Inc.

SECOND. The place in Ohio where its principal office is to be located is
117 B. Patterson St., Bellefontaine, Logan County.
(City, Village or Township)

THIRD. The purposes for which it is formed are: to engage in any lawful act or activity for which a corporation may be formed in Ohio pursuant to Section 1701.01-1701.98 of the Ohio Revised Code.