

UNOFFICIAL COPY

File Number 5244-455-2

87506824



To all to whom these Presents shall Come, Greeting:

I, Jim Edgar, Secretary of State of the State of Illinois, do hereby certify that

THE FOLLOWING AND HERETO ATTACHED IS A TRUE COPY OF THE CERTIFICATE OF AUTHORITY, INCLUDING THE LATEST CHANGE OF REGISTERED AGENT OR REGISTERED OFFICE OF ICS MEDICAL CORPORATION

In Testimony Whereof, I hereunto set my hand and cause to be affixed the Great Seal of the State of Illinois this 5TH day of AUGUST A. D. 19 37



Jim Edgar  
SECRETARY OF STATE

Property of Cook County Clerk's Office

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# SEAL OF THE STATE OF ILLINOIS

OFFICE OF THE SECRETARY OF STATE



## To all to whom these presents shall come, Greeting:

**Whereas**, APPLICATION FOR CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN THIS STATE, duly signed and verified of COS MEDICAL CORPORATION incorporated under the laws of the State of DELAWARE has been filed in the Office of the Secretary of State as provided by The "Business Corporation Act" of Illinois, in force July 13, A.D. 1931.

Now Therefore, I, JIM EDGAR, Secretary of State of the State of Illinois by virtue of the powers vested in me by law, do hereby issue this certificate and attach thereto a copy of the Application of the aforesaid corporation.

**In Testimony Whereof**, I have set my hand and cause it to appear the Great Seal of the State of Illinois  
 Done at the City of Springfield this 23<sup>rd</sup>  
 day of July AD 1931 and  
 of the Independence of the United States  
 the two hundred and 62<sup>nd</sup>

(SEAL)

Jim Edgar  
 SECRETARY OF STATE

87506824

7/13/81

NEW APPLICATION  
Filing Fee \$75.00 plus license fee  
and franchise tax

AMENDED APPLICATION  
Filing Fee \$25.00

REINSTATED APPLICATION  
Filing Fee \$100.00

Form BCA-108 or 114  
(FILE IN DUPLICATE)  
Each copy must have original signature

Date Paid	\$	25.00
License Fee	\$	50.00
Franchise Tax	\$	75.00
Filing Fee	\$	150.00
Penalty		
Clark		

APPLICATION FOR

~~AMENDED~~  
**ORIGINAL CERTIFICATE OF AUTHORITY OF FOREIGN CORPORATION**  
~~REINSTATED~~

To: Secretary of State  
Springfield, Illinois

ICS Medical Corporation

close

a corporation organized and existing

under and by virtue of the laws of the State of Delaware hereby makes application for an

original certificate of authority to transact business in the State of Illinois and submits the following application pursuant to "The Business Corporation Act", of Illinois.

(Use only when applicable if the name of the corporation is not available for use in Illinois.)

The name which the corporation elects to assume for use in this State, pursuant to Section 10.14, is

First—Date of incorporation May 29, 1981

Duration perpetual

Second—The location of the principal office as designated in the charter is 100 West Tenth Street, Wilmington, Delaware

The locations of its principal places of business are  
520 Interstate Road, Addison, Illinois 60101

Third—The name and address of the initial registered agent and registered office located in Illinois are

Registered agent Delmar P. Bloem

Registered office 705 Maple Street

City, Zip code, County Itasca, 60143, Du Page County

Fourth—The corporation is transacting business and qualified under the foreign corporation laws of the following state and countries other than Illinois: none

Fifth—The names of its officers and directors and their addresses are as follows:

President	Delmar P. Bloem	705 Maple Street	Itasca, Ill. 60143
Secretary	Robert M. Simenson	513 South Reuter	Arlington Heights, Ill. 60005
Director	Delmar P. Bloem	705 Maple Street	Itasca, Ill. 60143
Director	Robert P. Simenson	513 South Reuter	Arlington Heights, Ill. 60005
Director			
Director			
Director			
Director			

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Sixth—The purposes or purposes for which it was organized which it proposes to pursue in the transaction of business in this State are (A general, all inclusive purpose is not permitted. Please make no reference to laws of states other than Illinois.)

To manufacture and sell medical electronics products and to produce, purchase, take, receive or otherwise acquire, own or otherwise hold, sell and convey, lease as lessor, pledge, mortgage or otherwise dispose of, and otherwise deal in and with, goods, wares, merchandise and other personal property of every kind and description.

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Seventh—The number of shares which it has authority to issue, required by classes, par value of shares, shares without par value, and series if any, within a class is

Class	Series (if any)	Number of Shares	Par value per share or statement that shares are without par value
Common	None	2000	/\$ 25.00

Eighth—The number of its issued shares, required by classes, par value of shares, shares without par value, and series, if any, within a class is. NOTE ("Issued" shares, include (1) "outstanding" shares, and (2) all shares which have been issued and repurchased or redeemed by the corporation, but not canceled of record in the home State.)

Class	Series (if any)	Number of Shares	Par value per share or statement that shares are without par value
Common	None	2000	\$25.00

Ninth—The amount of stated capital and the amount of paid in surplus of the corporation as defined by "The Business Corporation Act" of Illinois, is

*All paid 50,000*

Stated Capital	\$ 50,000.00
Paid in Surplus	\$ 0.00
Total	\$ 50,000.00

(Note: If no Paid in Surplus, insert "None")

The basis for computation of franchise taxes payable by foreign corporations is set forth in Section 130 of the Business Corporation Act.

Over Articles Tenth through Fourteenth if an amended or reinstated application

Tenth—Give an estimate of the total value of all the property of the corporation for the following year	\$ 200,000.00
Eleventh—Give an estimate of the total value of all the property of the corporation for the following year that will be located in Illinois	\$ 200,000.00
Twelfth—State the estimated total business of the corporation to be transacted by it everywhere for the following year	\$ 700,000.00
Thirteenth—State the estimated annual business of the corporation to be transacted by it at or from places of business in the State of Illinois	\$ 700,000.00

Fourteenth—  
INTERROGATORIES:

- (a) Is the corporation actually transacting business at the present time in the State where it was organized? No
- (b) From what office and the affairs of the corporation be managed? Illinois
- (c) To what office or offices will all contracts with the corporation be forwarded for their acceptance? Illinois
- (d) At what office or offices will the directors and stockholders meeting be held? Illinois
- (e) The number of shares of all classes owned by residents of Illinois is 2,000
- (f) The number of shares of all classes owned by non-residents of Illinois is None
- (g) Is the corporation transacting business in this State at this time? No

(h) If your answer is in the affirmative, state the exact date on which it commenced to transact business in Illinois.

NECESSARY TO BE FILED WITH THE STATE SECRETARY OF STATE IN ORDER TO BE VALID IN THE STATE OF ILLINOIS.

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IN WITNESS WHEREOF, the undersigned corporation has caused this report to be executed in its name by its

President attested by its

Secretary, this

30<sup>th</sup> day of

June

A.D. 1981

ICS Medical Corporation

Exact Corporate Title

Place  
CORPORATE SEAL  
HERE

By

*John F. Blum*  
President or Vice President

Attest

*Robert A. Linn*  
Secretary or Assistant Secretary

As authorized officers, we declare that this document has been examined by us and is, to the best of our knowledge and belief, true, correct and complete.

NOTE 1. This form may be used in applying for either an original, an amended, or a reinstated certificate of authority. APPLICATIONS MUST BE ACCOMPANIED BY ONE COPY OF THE ARTICLES OF INCORPORATION AND ALL AMENDMENTS DULY AUTHENTICATED BY THE PROPER OFFICER OF THE STATE OR COUNTRY WHEREIN IT IS INCORPORATED.

NOTE 2. Only a certified copy of the articles of incorporation and all amendments thereon is acceptable. A photocopy will not be adequate. The application is not complete until such copy is furnished.

NOTE 3. This form may also be used for an amended application where the name, duration, or purpose has been changed. It will also be necessary to attach (a certified copy) of any amendment that changes the name, duration, or purpose. For a name change, please list the new name in Question 1 and, in parentheses, the former name.

NOTE 4. This statement is applicable only when the corporation must adopt an assumed name in order for its application to be considered. Do not use for an ordinary assumed name application, use separate form BCA 98104a. An assumed name shall contain separate and apart from any other word or abbreviation in such name, the word "corporation," "company," "incorporated," or "limited" or an abbreviation of one of such words. No corporation shall adopt more than one assumed name or do business thereunder and such name shall not be changed more often than annually. The corporation must enclose additional fees totaling \$25 for the assumed name and thereafter pay the prescribed annual assumed name fee.

NOTE 5. The registered office must be in Illinois and must be a street or road address, not a post office box number. A corporation may not act as its own registered agent but must appoint an individual or a corporation which has as its express purpose to act as registered agent for other corporations.

PAID

Form BCA-106 of 114

APPLICATION FOR CERTIFICATE  
OF AUTHORITY  
OF  
FOREIGN CORPORATION

SECRETARY OF STATE  
CORPORATION DEPARTMENT  
SPRINGFIELD, ILLINOIS 62756  
TELEPHONE (217) 782-7880

FILED

JUN 30 1981  
JIM EDGAR  
Secretary of State

File



PLEASE TYPE OR PRINT CLEARLY IN BLACK INK

FILING DEADLINE IS PRIOR TO 07/01/87

RETURN TO

STATE OF ILLINOIS  
FOREIGN CORPORATION ANNUAL REPORTREGISTRATION  
F 5266-465-9**FILED**

JUN 09 1981

YEAR OF 1987

11  
SECRETARY OF STATE  
CORP. NAME  
REGISTERED AGENT  
REGISTERED OFFICE  
CITY AND ZIP CODEICS MEDICAL CORPORATION  
E DELMAR F. BLOEM  
1795 CORTLAND COURT  
ADDISON, ILL. 60101-4208

042882

DU PAGE

1 5 5 7 1 2 0 3 0

Date Qualified To

3) Do Business in IL 07/31/1981

One complete address of principal office in state of Illinois, if different from that above.

See #2 - Changes

Phone Number of Principal Office  
363125711

2) AGENT OFFICE CHANGES ONLY

ICS MEDICAL CORPORATION

E Delmar F. Bloem

2227 Harmon Drive

Schmberg, IL 60173 Cook County

4) The names and addresses of the officers and directors are of officers are directors. SO STATE:

NAME	OFFICE	NUMBER & STREET	CITY	STATE	ZIP
Delmar F. Bloem	President	642 N. Roselle Rd.	Chicago, IL	60662	
Robert M. Simenson	Secretary	513 S. Reuter Dr.	Arlington Heights, IL	60125	
Delmar F. Bloem	Treasurer	See above			
	Director	Also director			

5) The type of business actually conducted in Illinois is

5) Number of shares authorized and issued as of 04/30/87

CLASS	SERIES	PAR VALUE	NUMBER AUTHORIZED	NUMBER ISSUED
PREFERRED		25.00	2,000	2,000

7a) The amount of paid-in capital as of 04/30/87

PAID-IN CAPITAL \$ 50,000

Paid-in Capital as of the terms  
stated in the Articles of Incorporation  
and the Certificate of Incorporation

7b) The Paid-in Capital as of 04/30/87

in records with the Secretary of State is

TOTAL \$ 50,000

The figures in items 7a & 7b may not be stated  
with the same number of decimals

The figures in items 7a &amp; 7b may not be stated

**ITEM 8 MUST BE SIGNED**

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