

CERTIFICATE OF AUTHORITY OF

ALPHA-MED., INC.

I, PETE T. CENARRUSA, Secretary of State of the State of Idaho, hereby certify that duplicate originals of an Application of
for a Certificate of Authority to transact business in this State,
duly signed and verified pursuant to the provisions of the Idaho Business Corporation Act, have
been received in this office and are found to conform to law.
ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of ALPHA-MED., INC. Authority to
ALPHA-MED., INC.
to transact business in this State under the name
and attach hereto a duplicate original of the Application
for such Certificate.
June 5, 1987 Dated
SECRETARY OF STATE
SECRETARY OF STATE
Corporation Clerk

APPLICATION FOR CERTIFICATE OF AUTHORITY

(Profit Corporation)

To	the Secretary of State of Idah Pursuant to Section 30-1-11		he undersigned	Corporation:	hereby applies for a Certificate of
Au	thority to transact business in				
1	The serve of the comment is a	:. Almha-M	ied Inc		•
1.	The name of the corporation	IS	icu , inc.		
2.	The name which it shall use in	n Idaho is Al	pha-Med, In	c.	
	(To be used only when requi Board of Directors resolution			•	n file. Must be accompanied by a
3.	It is incorporated under the la	ws of Arizo	na		
4.	The date of its incorporation	is <u>January</u>	25, 1977		and the period of its duration
	is perpetual		<u> </u>		
5.	The address of its principal o	ffice in the state	or country unde	r the laws of	which it is incorporated is
	3331 East Corona Ave	nue. Phoenix	. Arizona 8	5040	
•		·			shasin isan C
Θ.	The address to which corresp	ondence should	be addressed, it	amerent mon	i that in hem 5.
	Same				
7.	The street address of its propo	osed registered of	fice in Idaho is	1710 Cor	onado, Idaho Falls,
	Idaho 83401		<u> </u>		, and the name of its proposed
		1	Michael Ica		
8.	The purpose or purposes whi	ich it proposes to	pursue in the t	ransaction of 1	business in Idaho are:
	to represent various	manufacture	rs who sell	medical a	and medically related
	products				
9.	The names and respective ad	ldresses of its dire	ectors and offic	ers are:	_
	Name	Office			Address
Sh	arrel D. Lewis	President,	Treasurer	3331 East	Corona Avenue
		and Direct	or	Phoenix,	Arizona 85040

1.441he	Office	Atuui CSS
Sharrel D. Lewis	President, Treasurer	3331 East Corona Avenue
	and Director	Phoenix, Arizona 85040
William J. Branson	Vice-President	3331 East Corona Avenue
	(Arizona Division)	Phoenix, Arizona 85040
Michael J. Howard	Vice-President	3331 East Corona Avenue
	(Utah Division)	Phoenix, Arizona 85040

(continued on reverse)

Name	Office	Address				
Sandra K. Lewis	Secretary and	3331 East Corona Avenue				
	Director	Phoenix, Arizona 85040				
		· 				
10. The corporation accepts	and shall comply with the pro	ovisions of the Constitution and the laws of the State of				
ldaho.	F					
II This Application is accor	nnanied by a certificate of Co	orporate Status or Existence, duly authenticated by the				
		e laws of which it is incorporated.				
Dated: June 2, 1987						
	Alnha Wa	d Inc				
	Alpha-Me					
		(Corporation Name)				
	ву 🗸					
	By X Sharrel D. Lewis,	(Corporation Name)				
	ву 🗸	(Corporation Name)				
STATE OF ARIZONA	By X Sharrel D. Lewis, and X Sandra K. Dewis,	(Corporation Name)				
	By X Sharrel D. Lewis, and X Sandra K. Bewis,)) ss:	(Corporation Name)				
COUNTY OF Maricopa	Sharrel D. Lewis, and X Sandra K. Dewis,)) ss:	(Corporation Name) A Corporation Name) Its President North President Source X President North Name X President Name X Presi				
COUNTY OF Maricopa	By Sharrel D. Lewis, and Sandra K. Bewis,)) ss:)	(Corporation Name) Its President Nove President State Specific (please specific) Its Secretary Assistant Secretary (please specific) , a notary public, do hereby certify that on				
COUNTY OF Maricopa I, JANET M. DEBO this 2nd	By Sharrel D. Lewis, and Sandra K. Bewis,)) ss:) LT day of June	(Corporation Name) Its President Nova President State Specific (Parameters) Its Secretary Assistant Screening (parameters) , a notary public, do hereby certify that on, 19 87, personally appeared before				
COUNTY OF Maricopa I, JANET M. DEBO this 2nd	By Sharrel D. Lewis, and Sandra K. Bewis,)) ss:) LT day of June	(Corporation Name) Its President Nove President State Specific (please specific) Its Secretary Assistant Secretary (please specific) , a notary public, do hereby certify that on				
COUNTY OFMaricopa I,JANET M. DEBO this2nd me_Sharrel D. Lewis as	Sharrel D. Lewis, and Sandra K. Dewis, Sandra K. Dewis, Sandra K. Dewis, LT day of	(Corporation Name) Its President Nova President State Specific (Parameters) Its Secretary Assistant Screening (parameters) , a notary public, do hereby certify that on, 19 87, personally appeared before				
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COUNTY OFMaricopa I,JANET M. DEBO this2nd me Sharrel D. Lewis a the President and Se	Sharrel D. Lewis, and Sandra K. Bewis,)) ss: LT day of June nd Sandra K. Lewis cretary of Alpha-M	(Corporation Name) Its President Nove President State Specific Its Secretary Assistant Screening (pleasesspecific) , a notary public, do hereby certify that on, 19 87, personally appeared before, who being by me first duly sworn, declared that (5) is the led, Inc.				
COUNTY OFMaricopa	Sharrel D. Lewis, and Sandra K. Dewis, Sandra K. Dewis, Sandra K. Dewis, Sandra K. Lewis LT day of June nd Sandra K. Lewis cretary of Alpha-M document as Officers	(Corporation Name) Its President Nove President State Specific Its Secretary Assistant Screening (pleasesspecific) , a notary public, do hereby certify that on, 19 87, personally appeared before, who being by me first duly sworn, declared that (5) is the led, Inc.				
COUNTY OFMaricopa I,JANET M. DEBO this2nd me Sharrel D. Lewis a the President and Se	Sharrel D. Lewis, and Sandra K. Dewis, Sandra K. Dewis, Sandra K. Dewis, Sandra K. Lewis LT day of June nd Sandra K. Lewis cretary of Alpha-M document as Officers	(Corporation Name) Its President Norse President Screen Apple (Corporation Name) Its Secretary (Assessment Screen apple (Corporation) , a notary public, do hereby certify that on, 19 87, personally appeared before, who being by me first duly sworn, declared that (S) (S)				
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I, JANET M. DEBO this 2nd me Sharrel D. Lewis as the President and Se they that ***He** signed the foregoing the statements therein contain	Sharrel D. Lewis, and Sandra K. Bewis, Sandra K. Bewis, Sandra K. Bewis, Sandra K. Lewis LT day of June nd Sandra K. Lewis cretary of Alpha-M document as Officers led are true.	(Corporation Name) Its President Nove President State Specific Its Secretary Assistant Screening (pleasesspecific) , a notary public, do hereby certify that on, 19 87, personally appeared before, who being by me first duly sworn, declared that (5) is the led, Inc.				



OFFICE OF THE

CORPORATION COMMISSION

To all to Whom these Presents shall Come, Greeting:

I, the Executive Secretary of the Arizona Corporation Commission, DO HEREBY CERTIFY that

*** ALPHA-MED., INC. ***

a Domestic Corporation organized under the laws of the State of Arizona, did incorporate on JANUARY 25, 1977

I FURTHER CERTIFY that this corporation has filed all affidavits and annual reports and paid all annual filing fees required to date and, therefore, is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this

<u>15TH</u> day of <u>MAY</u> 19<u>87</u>, A.D.