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Florida Department of State

Division of Corporations

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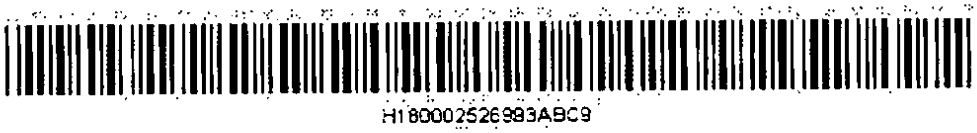

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FOREIGN PROFIT/NONPROFIT CORPORATION

School Based Urgent Care Network Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	$70.00

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N CULLIGAN
AUG 30 2018

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. School Based Urgent Care Network
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

School Based Urgent Care Network Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. California
(State or country under the law of which it is incorporated)

3. 38-4054409
(FEI number, if applicable)

4. June 9, 2017
(Date of incorporation)

5. _____
(Date of duration, if other than perpetual)

6. upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 504 Mission Street, Suite 800, San Francisco, California 94105
(Principal office address)

_____
(Current mailing address, if different)

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8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

9. **Registered agent's acceptance:**
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System, Donna Peterson-Riggs, Asst. Secretary

Donna Peterson-Riggs
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Robert Darzynkiewicz, M.D.
Address: 604 Mission Street, Suite 800
San Francisco, California 94105

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

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B. OFFICERS

President: Robert Darzynkiewicz, M.D.
Address: 604 Mission Street, Suite 800
San Francisco, California 94105

Vice President: _____
Address: _____

Secretary: Robert Darzynkiewicz, M.D.
Address: 604 Mission Street, Suite 800, San Francisco, California 94105

Treasurer: Robert Darzynkiewicz, M.D.
Address: 604 Mission Street, Suite 800, San Francisco, California 94105

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Robert Darzynkiewicz, M.D., President
(Typed or printed name and capacity of person signing application)

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State of California
Secretary of State
CERTIFICATE OF STATUS

ENTITY NAME:

SCHOOL BASED URGENT CARE NETWORK

FILE NUMBER:	C4035313
FORMATION DATE:	06/09/2017
TYPE:	DOMESTIC CORPORATION
JURISDICTION:	CALIFORNIA
STATUS:	ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of August 27, 2018.

ALEX PADILLA
Secretary of State

MAK

NP-25 (REV 03/2018)