F19000003221

(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(Cit	ty/State/Zip/Phone #	r)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Name)			
(Document Number)					
Certified Copies	_ Certificates o	f Status			
Special Instructions to Filing Officer:					





200331379832

87/62/19--81011--863 **70.00



BRUCE IIL 15 2019

COVER LETTER

TO: Registration Sec Division of Cor						
APIC Con	sulting Services, Inc.					
SUBJECT:	Name of corpo	ration	- must include suffix			
Dear Sir or Madam:						
"Certificate of Existence	on by Foreign Corporatio e," or "Certificate of Good n corporation to transact b	l Stan	ding" and check are su	act Business in bmitted to reg	n Floride ister the	Ļ"
Please return all corresp Leslie Kretzu	ondence concerning this r	nat te r	to the following:			
		of I	Person			
APIC Consulting Services	, Inc					
		/Com	pany			
1400 Crystal Drive, Suite 900					ر، سنڌ	20
Arlington, VA 22202			2015 2015			
info@apicconsulting.com	City/St	ate an	nd Zip code			iv
	E-mail address: (to be u	ised fo	or future annual report	notification)	7 1.	्डू जा
For further information o	concerning this matter, ple	ease ca	all:		ψ.	
Nicole Nesbitt	202 at (454-2645			•
Name of Person	Area	Code	Daytime Telep	hone Number	_	
STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive (Tallahassee, FL	orations Center Circle 32301		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7		
■ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		\$78.75 Filing Fee & Certified Copy	\$87.50 F Certific Certifie	ate of St	

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.

"inc.," "Co.," "C	orporation; must include "INCORPORATED," (corp.," "Inc.," "Co.," or "Corp.")			
Delaware 2.	able in Florida, enter alternate corporate name ad	.6-2 2999 22	business in Florida)	
	y under the law of which it is incorporated)	(FEI number, if appli	icable)	
March 31, 2008	•			
(Date	of incorporation) 5	(Date of duration, if other than perpetual)		
7. Arlington, VA 2.	(Principal	lorida, if prior to registration) 2, F.S., to determine penalty liability office address) address, if different)		
	et address of Florida registered agent: (P.O.) C T Corporation System	Box NOT acceptable)	2119 JUL - 2	
Name: Office Address:	1200 South Pine Island Road	_		
- 11100 A 11101 003.	Plantation,	— 33324 , Florida	क कि	
•	(City)	(Zip code)		
uesignatea in inis f <mark>urther agree</mark> to c	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointment comply with the provisions of all statutes relations with and accept the obligations of m C T Corporation System	nt as registered agent and agree tive to the proper and complete	to act in this capacity. I performance of my	

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: __ Address: Vice Chairman: Address: Brenda P. Grant, RN, BSN, MPH, CIC, CHES, FAPIC Director. 1400 Crystal Drive, Suite 900, Arlington, VA 22202 Address: Kenneth T. Segel, MBA Director: 1400 Crystal Drive, Suite 900, Arlington, VA 22202 Address: **B. OFFICERS** Patti Grant, RN, BSN, MS, CIC, FAPIC President: 1400 Crystal Drive, Suite 900, Arlington, VA 22202 Address: Vice President: Address: Patsy Deyo, MSN, RN Secretary: 1400 Crystal Drive, Suite 900, Arlington, VA 22202 Address: Chief Executive Officer: Katrina Crist, MBA, CAB Treasurer: 1400 Crystal Drive, Suite 900, Arlington, VA 22202 Address: 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. KATRINA (RIST CHIEF EXECUTIVE OFFICER (Typed or printed name and capacity of person signing application)

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "APIC CONSULTING SERVICES, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF JULY, A.D.

2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 203133985

Date: 07-01-19