

M/8800001954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

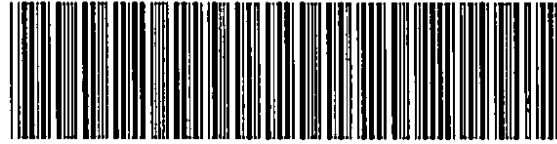
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 FEB 23 PM 12:43
TALLAHASSEE FLORIDA

J. LEGGETT
FEB 26 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 1, 2018

MICHAEL BORKOWSKI
1901 W CYPRESS CREEK ROAD, 6TH FLOOR
FT LAUDERDALE, FL 33309 US

SUBJECT: DEFINING MOMENT RECOVERY COMMUNITY, LLC
Ref. Number: W18000010601

We have received your document for DEFINING MOMENT RECOVERY COMMUNITY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

✓ A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 513A00002166

RECEIVED
FEB 26 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DEFINING MOMENT RECOVERY COMMUNITY, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MICHAEL BORKOWSKI
Name of Person

DELPHI BEHAVIORAL HEALTH GROUP LLC
Firm/Company

1901 W. CYPRESS CREEK ROAD, 6TH FLOOR
Address

FT. LAUDERDALE, FL 33309
City/State and Zip Code

MICHAEL@DELPHIHEALTHGROUP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL BORKOWSKI at (954) 675-6898
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. DEFINING MOMENT RECOVERY COMMUNITY, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

DEFINING MOMENT RECOVERY RESIDENCE, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. _____ (FEI number, if applicable)

4. _____ (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3030 HARBOR DRIVE
(Street Address of Principal Office)
FT. LAUDERDALE, FL 33316

6. 1901 W. CYPRESS CREEK ROAD
(Mailing Address)
6TH FLOOR
FT. LAUDERDALE, FL 33309

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

Name: MICHAEL BORKOWSKI

Office Address: 1901 W. CYPRESS CREEK ROAD, 6TH FLOOR

FT. LAUDERDALE, Florida 33309
(City) (Zip code)

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Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

MICHAEL BORKOWSKI
(Registered agent's signature)


8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>CEO</u>	<u>DOMINIC SIRIANNI</u> <u>1901 W. CYPRESS CREEK RD, 6th Floor</u> <u>FT. LAUDERDALE, FL 33309</u>	<u>CFO</u>	<u>MICHAEL BORKOWSKI</u> <u>1901 W. CYPRESS CREEK RD, 6th Floor</u> <u>FT. LAUDERDALE, FL 33309</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. I am aware that any 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.


Signature of an authorized person

MICHAEL BORKOWSKI
Typed or printed name of signer

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DEFINING MOMENT RECOVERY COMMUNITY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTEENTH DAY OF FEBRUARY, A.D. 2018.




Jeffrey W. Bullock, Secretary of State

6700081 8300

SR# 20180954959

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202165129

Date: 02-16-18