

1123000015594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

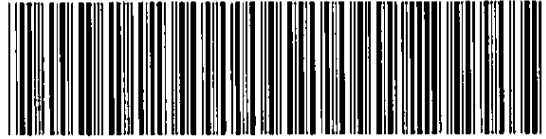
(Business Entity Name)

(Document Number)

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Name:	MFCC Equity HoldCo, LLC
Document #:	
Order #:	15274289

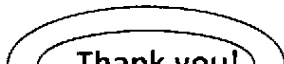
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Amount: \$ 125.00



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MFCC Equity HoldCo, 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:

Brianna Volkman

Name of Person

Husch Blackwell LLP

Firm/Company

511 North Broadway, Suite 1100

Address

Milwaukee, WI 53202

City/State and Zip Code

n_sharma94@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brianna Volkman at (414) 978-5326

Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:
Please make check payable to: **FLORIDA DEPARTMENT OF STATE**
 \$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. MFCC Equity HoldCo, L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. 93-3619562 (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. 2776 Enterprise Road (Street Address of Principal Office) Suite 100 Orange City, FL 32763
6. 2776 Enterprise Road (Mailing Address) Suite 100 Orange City, FL 32763

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

Name: Neeraj Sharma, M.D.
Office Address: 2776 Enterprise Road, Suite 100
Orange City, Florida 32763
(City) (Zip code)

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.

Neeraj Sharma, M.D.
073A06400411491
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Name and Address:

Manager Name: Gregory L. Ortega, M.D.
 Member Address: 2776 Enterprise Road
 Authorized Suite 100
 Person Orange City, FL 32763
 Other Vice President Other

Title or Capacity: Name and Address:

Manager Name: Neeraj Sharma, M.D.
 Member Address: 2776 Enterprise Road
 Authorized Suite 100
 Person Orange City, FL 32763
 Other President Other

Manager Name: Rene Cabeza, M.D.
 Member Address: 2776 Enterprise Road
 Authorized Suite 100
 Person Orange City, FL 32763
 Other Secretary Other Treasurer

Manager Name: Santosh M. Nair, M.D.
 Member Address: 2776 Enterprise Road
 Authorized Suite 100
 Person Orange City, FL 32763
 Other Vice President Other

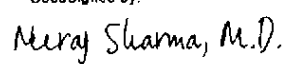
Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

DocuSigned by:

 073A06400411491

Signature of an authorized person

Neeraj Sharma, M.D.

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MFCC EQUITY HOLDCO, 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 TWELFTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



Jeffrey W. Bullock, Secretary of State

2414090 8300

SR# 20234200769

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

Authentication: 204792270

Date: 12-12-23