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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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WW-32897

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TRANSMITTAL LETTER

TO: Registration Section Division of Corp					
SUBJECT: CARE	CONSULTING GROU	P, INC.			
·		tion - must include suffix)			•
Dear Sir or Madam:					
"Certificate of Existence" to transact business in Fle Please file Fictitious Na	", and check are submitted to	•	ed foreign corp	oration	t f *
	JACOB W. HOE	CHST			_
		of Person)			-
	CARE CONSULTIN	G GROUP, INC.			_
		Company)			•
	625 WALTHAM AV	ENUE, SUITE 1500			
		ldress)			•
	ORLANDO, FLO	ORIDA 32809			_
		e and Zip code)			-92 11
For further information of	oncerning this matter, please	e call:			DEC 10 PM
JACOB W. HOECH					က
(Name of Person	(Area	a Code & Daytime Telephon	e Number)	1	ON ON
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	;		
Enclosed is a check for th	e following amount:				
X \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S \$78.75 Filing Fee & Certified Copy	S87.50 Fill Certificate Certified C	of Status	&



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 10, 2002

JACOB W. HOECHST CARE CONSULTING GROUP, INC. 625 WALTHAM AVE., STE. 1500 ORLANDO, FL 32809

SUBJECT: CARE CONSULTING GROUP, INC.

Ref. Number: W02000032897

We have received your document for CARE CONSULTING GROUP, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

Please see the enclosed sample certificate from Delaware so you will know what we need.

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 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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 602A00065194



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 3, 2002

JACOB W. HOECHST CARE CONSULTING GROUP, INC. 625 WALTHAM AVE., STE. 1500 ORLANDO, FL 32809

SUBJECT: CARE CONSULTING GROUP, INC.

Ref. Number: W02000032897

We have received your document for CARE CONSULTING GROUP, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

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 your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 302A00064220



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 19, 2002

JACOB W. HOECHST CARE CONSULTING GROUP, INC. 625 WALTHAM AVE., STE. 1500 ORLANDO, FL 32809

SUBJECT: CARE CONSULTING GROUP, INC.

Ref. Number: W02000032897

We have received your document for CARE CONSULTING GROUP, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

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 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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 602A00062436

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.

2. DELEWARE	3	35-2187133	
2DELEWARE (State or country under the law of which it is income.)	orporated)	(FEI number, if applicable)	
NOVEMBER 13, 2002	5	PERPTUAL ation: Year corp. will cease to exist or	133
(Date of incorporation)	(Dur	ation: Year corp. will cease to exist of	r "perpetual")
5. <u>UPON QUAL</u>	<u> IFICATION</u>		<u> </u>
(Date first transacted business in Florida. If corp (SEE SECT)		cted business in Florida, insert "upon 502 and 817.155, F.S.)	qualification.")
7. 625 WALTHAM AVE., ORLA			
(Prin 625 WALTHAM AVE., ORLA	cipal office address)		
(Curr	ent mailing address)		
B. CONSULTNG			
(Purpose(s) of corporation authorized in l	nome state or country	to be carried out in state of Florida)	
). Name and <u>street address</u> of Florida regis	stered agent: (P.O.	Box or Mail Drop Box NOT acce	ptable) A CLARC
Name: JACOB W. HOECHS	<u>T</u>		
Office Address: 625 WALTHAM AVE.,	SUITE 1500		AKT LA ASSEEL
ORLANDO		, Florida <u>32809</u> (Zip code)	$\mathbb{Z}_{\mathbb{Z}}$
<u> </u>		(Zip code)	≦± cn
(City)			<u> </u>
			75
0. Registered agent's acceptance:		process for the above stated corpo	32
0. Registered agent's acceptance: laving been named as registered agent and lesignated in this application, I hereby accep	to accept service of of the appointment	is registered agent and agree to a	pration at the place ct in this capacity. I
0. Registered agent's acceptance: Iaving been named as registered agent and	to accept service of ot the appointment of all statutes relativ	ns registered agent and agree to a e to the proper and complete perf	pration at the place ct in this capacity. I

11. 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.

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

Chairman:	JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500, ORLANDO, FL 32809	
Vice Chairma	in: JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500, ORLANDO, FL 32809	
Director:	JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500, ORLANDO, FL 32809	
Director:	JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500, ORLANDO, FL 32809	
B. OFFICE	CRS	<u>````````````````````````````````</u>
President:	JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500. ORLANDO, FL 32809	≥% %
Vice Presiden	t: JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500. ORLANDO, FL 32809	
Secretary:	JACOB W. HOECHST	5. 5 0m. 6
Address:	625 WALTHAM AVE., SUITE 1500, ORLANDO, FL 32809	L-
Treasurer:	JACOB W. HOECHST	
Address:	625 WALTHAM AVE., SUITE 1500, ORLANDO, FL 32809	
NOTE: If n	ecessary, you may attach an addendum to the application listing additional officers and	d/or directors.
-	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the a	application)
14. 	(Typed or printed name and capacity of person signing application)	<u> </u>

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CARE CONSULTING GROUP, 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 FOURTH DAY OF
DECEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CARE CONSULTING GROUP, INC." WAS INCORPORATED ON THE THIRTEENTH DAY

OF NOVEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



3590233 8300

Warriet Smith Windson, Secretary of State

•

AUTHENTICATION: 2122950

020742370 DATE: 12-04-02