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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

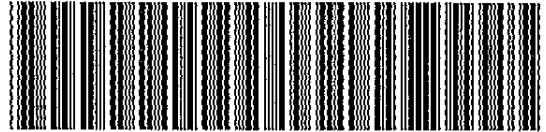
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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BRISKIN & ASSOCIATES, L. C.

ATTORNEYS AT LAW

1001 CAMBRIDGE SQUARE

SUITE D

ALPHARETTA, GEORGIA 30004

TEL: (770) 410-1555

FAX: (770) 410-3281

www.briskinlaw.com

January 24, 2006

Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Application by Foreign Corporation for Authorization to Transact
Business in Florida for Boone-Scatturo Associates, Inc.


Dear Sir/Madam:

Enclosed please find an original and one copy of an Application by Foreign Corporation for Authorization to Transact Business in Florida (the "Application") for Boone-Scatturo Associates, Inc. ("Boone-Scatturo"), a Certificate of Existence for Boone-Scatturo, and a check for eighty seven dollars and fifty cents (\$87.50) representing the filing fee for the Application and payment for the Certificate of Status and certified copy. Please file the application and send to appropriate documents back to this address.

If you have any further questions concerning this matter, please feel free to contact this office at any time.

Sincerely,

BRISKIN & ASSOCIATES, L.C.



Hannah F. Grossman
Law Clerk

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Boone-Scaturro Associates, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael D. Cross, Jr.

(Name of Person)

Briskin & Associates, L.C.

(Firm/Company)

1001 Cambridge Square

(Address)

Alpharetta, GA 30004

(City/State and Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael D. Cross, Jr.

(Name of Person)

at (770) 410-1555

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. **Boone-Scaturro Associates, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **Georgia**

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

3. **58-2275897**

(FEI number, if applicable)

4. **11/18/1996**

(Date of incorporation)

5. **perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

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

7. **1122 Cambridge Square, Suite A, Alpharetta, GA 30004**

(Principal office address)

1122 Cambridge Square, Suite A, Alpharetta, GA 30004

(Current mailing address)

8. **The corporation intends to operate its physician recruitment business in FL**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: **Mindy Kelchner**

Office Address: **1665 Ludlow Road**

Marco Island

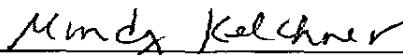
(City)

, Florida **34145**

(Zip code)

10. **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.



(Registered agent's signature)

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: _____

A. DIRECTORS

Chairman: Mary Ellen Scaturro
Address: 8831 South Somerset Lane
Alpharetta, GA 30004

Vice Chairman: Leonard Scaturro
Address: 2005 Bent Oaks BLVD.
Biloxi, MS 39531

Director: Charles Boone
Address: 1007 Seven Springs Road
Spartenburg, SC 29307

Director: _____
Address: _____

B. OFFICERS

President: (CEO) Mary Ellen Scaturro
Address: 1122 Cambridge Square, Suite A
Alpharetta, GA 30004

Vice President: n/a
Address: _____

Secretary: Leonard Scaturro
Address: 2005 Bent Oaks BLVD., Biloxi, MS 39531

Treasurer: (CFO) Leonard Scaturro
Address: 2005 Bent Oaks BLVD., Biloxi, MS 39531

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TALLAHASSEE, FLORIDA

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

13. Mary Ellen Scaturro
(Signature of Director or Officer listed in number 12 of the application)
14. Mary Ellen Scaturro, President
(Typed or printed name and capacity of person signing application)

Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CONTROL NUMBER : K636556
DATE INC/AUTH/FILED: 11/18/1996
JURISDICTION : GEORGIA
PRINT DATE : 01/24/2006
FORM NUMBER : 211

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2006 FEB - 9 A 10:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BRISKIN & ASSOCIATES, L.C.
MICHAEL D. CROSS, JR.
1001 CAMBRIDGE SQUARE, SUITE D
ALPHARETTA, GA 30004

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of the above print date

BOONE SCATURRO ASSOCIATES, INC.
A GEORGIA PROFIT CORPORATION

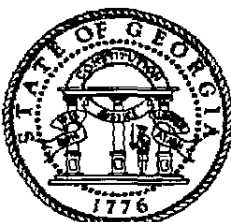
is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated.

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 1 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20060124151929488



Cathy Cox

Cathy Cox
Secretary of State