

F/2000005201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

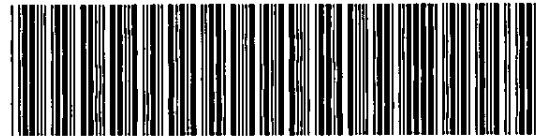
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
12 DEC 23 PM 1:49

FILED
12 DEC 28 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 12/31/12



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 472900 4816304

AUTHORIZATION

COST LIMIT \$ 70.00

[Handwritten signature]

ORDER DATE : December 24, 2012

ORDER TIME : 10:33 AM

ORDER NO. : 472900-035

CUSTOMER NO: 4816304

FOREIGN FILINGS

NAME: ACCELERATED CARE PLUS LEASING,
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER: _____

**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. **ACCELERATED CARE PLUS LEASING, 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. **Delaware**

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

3. **46-1520840**

(FEI number, if applicable)

4. **12/05/2012**

(Date of incorporation)

5. **Perpetual**

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

6. **N/A**

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

7. **10910 Domain Dr., Suite 300, Austin, TX 78758**

(Principal office address)

10910 Domain Dr., Suite 300, Austin, TX 78758

(Current mailing address)

8. **All purposes allowable under the Florida Business Corporation Act**

(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: **Corporation Service Company**

Office Address: **1201 Hays Street**

Tallahassee

(City)

, Florida

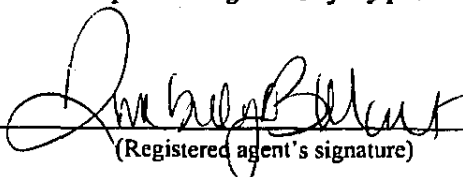
32301

(Zip code)

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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)

Kimberly B. Moret
as its agent

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: N/A

Address: _____

Vice Chairman: N/A

Address: _____

Director: Vinit K. Asar

Address: 10910 Domain Dr., Suite 300
Austin, TX 78758

Director: George E. McHenry

Address: 10910 Domain Dr., Suite 300
Austin, TX 78758

B. OFFICERS

President: Vinit K. Asar

Address: 10910 Domain Dr., Suite 300
Austin, TX 78758

Vice President: Thomas E. Hartman

Address: 10910 Domain Dr., Suite 300
Austin, TX 78758

Secretary: George E. McHenry

Address: 10910 Domain Dr., Suite 300, Austin, TX 78758

Treasurer: Antony Ricketts

Address: 10910 Domain Dr., Suite 300, Austin, TX 78758

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

13. _____

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. Thomas E. Hartman, Vice President

(Typed or printed name and capacity of person signing application)

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Attachment to Application for Authority

ACCELERATED CARE PLUS LEASING, INC.

Directors and Officers

<u>Title</u>	<u>Name</u>	<u>Address</u>
Director	Vinit K. Asar	10910 Domain Dr., Suite 300, Austin, TX 78758
Director	George E. McHenry	10910 Domain Dr., Suite 300, Austin, TX 78758
Chief Executive Officer	Vinit K. Asar	10910 Domain Dr., Suite 300, Austin, TX 78758
President	Vinit K. Asar	10910 Domain Dr., Suite 300, Austin, TX 78758
Chief Financial Officer	George E. McHenry	10910 Domain Dr., Suite 300, Austin, TX 78758
Treasurer	Antony Ricketts	10910 Domain Dr., Suite 300, Austin, TX 78758
Executive Vice President	George E. McHenry	10910 Domain Dr., Suite 300, Austin, TX 78758
Assistant Treasurer	George E. McHenry	10910 Domain Dr., Suite 300, Austin, TX 78758
Secretary	George E. McHenry	10910 Domain Dr., Suite 300, Austin, TX 78758
Vice President	Thomas E. Hartman	10910 Domain Dr., Suite 300, Austin, TX 78758
General Counsel	Thomas E. Hartman	10910 Domain Dr., Suite 300, Austin, TX 78758
Assistant Secretary	Thomas E. Hartman	10910 Domain Dr., Suite 300, Austin, TX 78758
Assistant Secretary	Louis J. Mestier	10910 Domain Dr., Suite 300, Austin, TX 78758
Assistant Secretary	Thomas C. Hofmeister	10910 Domain Dr., Suite 300, Austin, TX 78758
Assistant Secretary	Russell Allen	10910 Domain Dr., Suite 300, Austin, TX 78758
Assistant Secretary	Nicholas D. Dawe	10910 Domain Dr., Suite 300, Austin, TX 78758

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACCELERATED CARE PLUS LEASING, 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 TWENTY-FOURTH DAY OF DECEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACCELERATED CARE PLUS LEASING, INC." WAS INCORPORATED ON THE FIFTH DAY OF DECEMBER, A.D. 2012.

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

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TALLAHASSEE, FLORIDA

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


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0096205

DATE: 12-24-12