

F13000001465

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(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Orange Health Solutions, 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," or "Certificate of Good Standing" 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:

Nicole Bradbery
Name of Person
Orange Health Solutions, INC
Firm/Company
12276 San Jose Blvd. Ste 420
Address
Jacksonville, FL 32223
City/State and Zip code
nbradbery@orangehealth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

nicole Bradbery at (904) 338-3503
Name of Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 18, 2013

NICOLE BRADBERRY
ORANGE HEALTH SOLUTIONS, INC
12276 SAN JOSE BLVD., STE. 420
JACKSONVILLE, FL 32223

SUBJECT: ORANGE HEALTH SOLUTIONS, INC
Ref. Number: W13000015997

We have received your document for ORANGE HEALTH SOLUTIONS, INC and your check(s) totaling \$87.50. 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.

A brief description of the entity's nature of business must be included in the document.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 113A00006363

**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. Orange Health Solutions, 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 3. 80-0888155
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 22, 2013 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 1.22.2013
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 12276 San Jose Blvd Suite 420 Jacksonville, FL 32223
(Principal office address)

12276 San Jose Blvd. Suite 420 Jacksonville, FL 32223
(Current mailing address)

8. Any lawful business or Activity under the laws of this State
(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: Nicole Bradberry

Office Address: 12276 San Jose Blvd Ste 400

Jacksonville, Florida 32223
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

[Signature]
(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: Howard Buff

Address: 4070 Meadows Drive, Medina, MN 55340

Vice Chairman: _____

Address: _____

Director: Nicole Bradbery

Address: 627 Sweetwater Branch Lane
Jacksonville, FL 32259

Director: _____

Address: _____

B. OFFICERS

~~CEO~~

~~President:~~ Howard Buff

Address: 4070 Meadows Drive, Medina MN 55340

~~Vice~~ President: Nicole Bradbery

Address: 627 Sweetwater Branch Lane
Jacksonville, FL 32259

Secretary: Nicole Bradbery

Address: 627 Sweetwater Branch Lane Jax, FL 32259

Treasurer: Nicole Bradbery

Address: 627 Sweetwater Branch Lane, Jax, FL 32259

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. _____

Nicole Bradbery

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WRITTEN CONSENT
OF SOLE INCORPORATOR
OF
ORANGE HEALTH SOLUTIONS, INC.

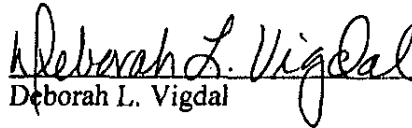
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TALLAHASSEE, FLORIDA

The undersigned, being the sole incorporator of Orange Health Solutions, Inc., a Delaware corporation, in accordance with the authority contained in Section 107 of the Delaware General Corporation Law, hereby adopts the following resolutions and instructs that this writing in lieu of meeting be filed with the minutes of the corporation.

RESOLVED, that the following named persons are hereby appointed to serve as directors of the corporation until their successors shall be elected and shall qualify:

Howard Buff
Nicole Bradberry

Dated: January 22, 2013


Deborah L. Vigdal

Delaware

The First State

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORANGE HEALTH SOLUTIONS, 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-SEVENTH DAY OF MARCH, A.D. 2013.

5278578 8300

130364353

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 0318424

DATE: 03-27-13