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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : NORTHWEST REGISTERED AGENT LLC
Account Number : I20090000081
Phone : (509) 768-2249
Fax Number : (323) 544-4790

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TALLAHASSEE, FLORIDA

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Email Address:

CS@LLCAGENT.COM

FOREIGN PROFIT/NONPROFIT CORPORATION

TravelDoc PA

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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August 8, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

NORTHWEST REGISTERED AGENT LLC

SUBJECT: TRAVELDOC PA CORPORATION
REF: W13000044255

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The use of the word "PA" and "Corporation" together is not allowed. If filing as a Professional Association, the word "PA" is sufficient.

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

Maryanne Dickey
Regulatory Specialist II
New Filing Section

FAX Aud. #: H13000175608
Letter Number: 613A00019008

4130001756083

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

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1. TravelDoc PA
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so designated in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. South Carolina
(State or country under the law of which it is incorporated)
3. NA
(FEI number, if applicable)
4. February 6, 2012
(Date of Incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. NA
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 113 Pinehurst Court West Columbia, SC 29170
(Principal office address)
113 Pinehurst Court West Columbia, SC 29170
(Current mailing address)
8. Medical services and treatment.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)
Name: Northwest Registered Agent, LLC.
Office Address: 3030 N. Rocky Point Dr. STE 150A
Tampa, Florida 33607
(City) (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.



Dan Keen-Manager

(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.

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

A. DIRECTORS

Chairman: Stephen Outten

Address: 113 Pinehurst Court West Columbia, SC 29170

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Stephen Outten

Address: 113 Pinehurst Court West Columbia, SC 29170

Vice President: _____

Address: _____


Secretary: Stephen Outten

Address: 113 Pinehurst Court West Columbia, SC 29170

Treasurer: Stephen Outten

Address: 113 Pinehurst Court West Columbia, SC 29170

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

13. 
(Signature of Chairman, Vice Chairman, or Treasurer listed in number 12 of the application)

14. Stephen Outten President
(Typed or printed name and capacity of person signing application)

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The State of South Carolina



Office of Secretary of State Mark Hammond

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TALLAHASSEE, FLORIDA

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

TRAVELDOC PA,

a corporation duly organized under the laws of the State of South Carolina on February 6th, 2012, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
29th day of July, 2013.

Mark Hammond
Mark Hammond, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual reports with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.

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