

F130000003636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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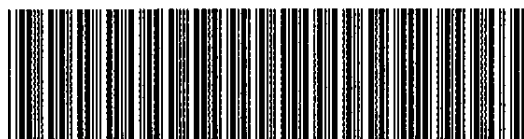
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

08/21/13--01021--009 **78.75

MD 8/26



825 Market Street, Suite 300
Allen, TX 75013
(214) 871-2118

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

August 12, 2013

Florida Secretary Of State
New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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13 AUG 21 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Application by Foreign Corporation For Authorization to Transact Business in Florida -
Discount Services, Inc.

To Whom It May Concern:

Enclosed please find the following documents for the above referenced entity:

1. Cover Letter sheet;
2. Application by Foreign Corporation For Authorization to Transact Business in Florida;
3. Certificate of Fact from the domicile state;
4. A check in the amount of \$78.75 for the filing fee and Certificate of Status; and
5. A copy of the filing and a self-addressed, stamped return envelope.

Please mark the copy "received" and return it directly to me in the enclosed envelope.

Please notify me if you have questions regarding this information.

Very truly yours,

A handwritten signature in cursive script that reads "Shelley Molge".

Shelley Molge
Legal Operations Assistant
Shelley.Molge@HomelandHealthCare.com

The information contained in this letter is confidential. It is protected by law, and contains trade secret information, and commercial or financial information the disclosure of which would cause substantial competitive harm.

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Discount Services, 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:

Randi Haluptzok

Name of Person

Discount Services, Inc.

Firm/Company

825 Market Street, Suite 300

Address

Allen, TX 75013

City/State and Zip code

randi.haluptzok@homelandhealthcare.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Randi Haluptzok

at (469) 324-5213

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

**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.

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TALLAHASSEE, FLORIDA

1. Discount Services, 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. Texas

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

3. 75-2707937

(FEI number, if applicable)

4. 5/14/1997

(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. 825 Market Street, Suite 300, Allen TX 75013

(Principal office address)

same

(Current mailing address)

8. Any and all lawful business in the State of Florida.

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(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.

By: _____

C T Corporation System

(Registered agent's signature)

Kimberly Baggett
Assistant Secretary

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Robert J. Byrnes

Address: 825 Market Street, Suite 300, Allen TX 75013

Director: Stephen V. Jones

Address: 825 Market Street, Suite 300 Allen TX 75013

B. OFFICERS

President: Robert J. Byrnes

Address: 825 Market Street, Suite 300 Allen TX 75013

Vice President: Reba J. Leonard

Address: 825 Market Street, Suite 300 Allen TX 75013

Secretary: Reba J. Leonard

Address: 825 Market Street, Suite 300 Allen TX 75013

Treasurer: Reba J. Leonard

Address: 825 Market Street, Suite 300 Allen TX 75013

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. Reba J. Leonard, Secretary

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

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ALLAHABEE, FLORIDA

Addendum to
Application by Foreign Corporation for Authorization to Transact Business in Florida
for Discount Services, Inc.

Question 12. B – Additional officers and/or directors:

<u>Name</u>	<u>Title</u>	<u>Address</u>
Stephen V. Jones	Chief Executive Officer	825 Market Street, Suite 300 Allen, TX 75013
Michael C. Sullivan	Chief Operating Officer	825 Market Street, Suite 300 Allen, TX 75103
William H. Keys	Chief Financial Officer & Controller	825 Market Street, Suite 300 Allen, TX 75013

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for DISCOUNT SERVICES, INC. (file number 144543900), a Domestic For-Profit Corporation, was filed in this office on May 14, 1997.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on June 25, 2013.



A handwritten signature in black ink, appearing to read "John Steen".

John Steen
Secretary of State

John Steen
Secretary of State
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TALLAHASSEE, FLORIDA