

FK1000004056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only³



900263482779

09/18/14--01002--011 **800.00

08/28/14--01026--002 **70.00

14 SEP 25 PM 2:48
CLERK OF STATE
ALL EMBOSSED LEGAL

11/14-53082

MD 9/26



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 29, 2014

DAVID WEIDNER
270 1ST AVE.S., SUITE 302
ST.PETERSBURG, FL 33701-4311

SUBJECT: SALVEO SPECIALTY PHARMACY, INC.
Ref. Number: W14000053082

We have received your document for SALVEO SPECIALTY PHARMACY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$800.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Maryanne Dickey
Regulatory Specialist II

Letter Number: 914A00018594

September 8, 2014

Ms. MaryAnne Dickey

Regulatory Specialist II

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Re: Letter Number: 914A00018594

Dear Ms. Dickey:

In reference to your letter referenced above, in respect to our "Foreign Corporation Application", please note the following:

1 – Enclosed please find a certificate of good standing, state of Delaware, as you have requested

2 – Enclosed please find a check for \$800, as you have requested

As to registered agent, we are domiciled in the state of Florida, at our address in St Petersburg, so we do not have a Florida registered agent.

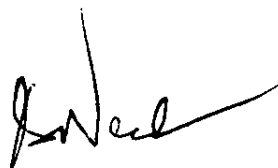
Please accept and complete this application, as now filed.

Please assign to us a Florida corporation or document number.

Any questions, please do not hesitate to contact me direct, preferably direct by phone or email, as these letters and applications back & forth are not the easiest communication channel.

Thank you.

Sincerely,



David Weidner, CFO

Salveo Specialty Pharmacy, Inc.

270 1st Ave S, Suite 302

St Petersburg, FL 33701-4311

(727) 873-1147

dweidner@salveospecialty.com

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT:

SALVED SPECIALTY PHARMACY 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:

DAVID WEIDNER

Name of Person

SALVED SPECIALTY PHARMACY INC.

Firm/Company

270 1st AVE S Suite 302

Address

ST PETERSBURG FLORIDA 33701-4311

City/State and Zip code

DWEIDNER@SALVEDSPECIALTY.COM

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

For further information concerning this matter, please call:

DAVID WEIDNER

Name of Person

at (727) 873-1147

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

September 18, 2014

DAVID WEIDNER
270 1ST AVE.S., SUITE 302
ST.PETERSBURG, FL 33701-4311

SUBJECT: SALVEO SPECIALTY PHARMACY, INC.
Ref. Number: W14000053082

We have received your document for SALVEO SPECIALTY PHARMACY, INC. and your check(s) totaling \$870.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Maryanne Dickey
Regulatory Specialist II

Letter Number: 914A00018594

**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.

SEP 25 PM 2:48
1160

1. SALVO SPECIALTY PHARMACY, 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. 45-2219585

(FEI number, if applicable)

4. 5/3/2011

(Date of incorporation)

5. PERPETUAL

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

6. 1-1-2012

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

7. 270 1st AVE S, Suite 302, St PETERSBURG, FLORIDA 33701-4311

(Principal office address)

STATE

(Current mailing address)

8. SPECIALTY PHARMACY MANAGEMENT AND OWNERSHIP

(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:

DAVID WEIDNER

Office Address:

270 1st AVE S, Suite 302

ST PETERSBURG

(City)

, Florida

33701-4311

(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:

JEFFREY FREEDMAN

Address:

270 1st AVE S Suite 302
ST PETERSBURG FLORIDA 33701-4311

Vice Chairman:

CHARLES BROWN

Address:

270 1st AVE S Suite 302
ST PETERSBURG, FLORIDA 33701-4311

Director:

Address:

Director:

Address:

B. OFFICERS

President:

JEFFREY FREEDMAN

Address:

270 1st AVE S Suite 302
ST PETERSBURG, FLORIDA 33701-4311

Vice President:

Address:

Secretary:

CHARLES BROWN

Address:

270 1st AVE S Suite 302, ST PETERSBURG, FLORIDA 33701-4311

Treasurer:

DAVID WEINER

Address:

270 1st AVE S Suite 302, ST PETERSBURG, FLORIDA 33701-4311

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.

DAVID WEINER CFO

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

Delaware

The First State

PAGE

14 SEP 25 PM 2:48

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SALVEO SPECIALTY PHARMACY, 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 NINTH DAY OF SEPTEMBER, A.D. 2014.

4977294 8300

141157771



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

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1683283

DATE: 09-09-14