## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.

Account Number : I20000000088
Phone : (800)221-0102
Fax Number : (800)944-6607

\*\*Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.\*\*

Email Address:

vlong@ncgemail.com

ATTN: Diane Cushing

FOREIGN PROFIT/NONPROFIT CORPORATION Nephrology Care Group, Inc.

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Corporate Filing Menu

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## **COVER LETTER**

TO: New Filing Sec Division of Co			
subject: Neph	rology Care Grou	ıp, İnc.	
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Dear Sir or Madam:			
"Certificate of Existence	tion by Foreign Corporation fore," or "Certificate of Good Stancer to transact busing	anding" and check are sub	
Please return all corresp Vicki Eggleste	nondence concerning this matt ON	ter to the following:	
	Name o	il' Person	
Stites & Harb	ison PLLC		_
	l'irm/Co	mpany	
401 Commer	ce Street, Suite 80	00	_
	۸۵۵	Iress	
Nashville, Te	nnessee 37219		
	•	and Zip code	
vlong@ncgem			7
•	E-mail address; (to be used	d for future annual report	notification)
For further information	concerning this matter, please	e call:	
Vicki Egglest	on a <sub>4</sub> ,615	, 782-2240 a Code & Daytime Teleph	
Name of Perso	on Area	a Code & Daytime Teleph	one Number
STREET/COM New Filing Sec Division of Con Clifton Buildin 2661 Executive Tallahussee, Fl	rporations B c Center Circle	MAILING A New Filing So Division of Co P.O. Box 632 Taltahassee, F	retion orporations 7
Enclosed is a check for	the following amount:		
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy
			(((H15000091035 3)))

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## 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.

(Entername of e	gy Care Group, Inc.  orporation; must include "INCORPORA  orp.," "Inc.," "Co.," or "Corp.")	TED," "CO	OMPANY," "CORPORATION,"	
(If name unavaile	ible in Florida, enter alternale corporate			ousiness in Florida)
Delaware		3. M	14000006070	
	y under the law of which it is incorporate		(FE) number, il appli	enble)
Decembe	er 31, 2014		erpetual	
•	of incorporation)		ration: Year corp. will cense to ex	• • •
Previously qualified	as a foreign LLC on 8/22/2014 (M1400000607			ilifying as a corporation.
			ida, if prior to registration) F.S., to determine penalty liability)	) 
2999 Pair	n Harbor Blvd, Suite B		· · ·	
	(Principal office			· · · · · · · · · · · · · · · · · · ·
2999 Palm	n Harbor Blvd, Suite B,	Palm H	larbor, FL 34683	
A	(Current maili	ig address)	- A - A - A - A - A - A - A - A - A - A	magagarangang panggapi (FATTANINGAN), Milita dibih adan panggarangan panggarangan panggarangan panggarangan pa
. Name and stree	t address of Florida registered agent	-	,	
Name:	Advanced Medical Service	es, LLC	_	APR
office Address:	2999 Palm Harbor Blvd.	Suite B		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Paim Harbor		, Florida 34683 (Zip code)	
	(City)		(Zip code)	
. Registered ago	ent's acceptance;			
laving been nam	ed as registered agent and to accep			corporation at the place
	application, I hereby accept the appoint of all states			
	amiliar with and accept the obligat			,,
		·		
	· · ·		9	
	ש בוחוניתולים	/\ /\*		

10. 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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·		
Names and business addresses of officers and/or directors:		
DIRECTORS		
Wirginia A. Long		
2999 Palm Harbor Blvd, Suite B, Palm Harbor, FL 34683		<del></del>
Christopher Pyrek		
2999 Palm Harbor Blvd, Suite B, Palm Harbor, FL 34683		
John A. Johnson	45444	
2999 Palm Harbor Blvd, Suite B, Palm Harbor, FL 34683		
5.	<del></del>	
John Ales		<del></del>
2000 Date Uarhay Chiel Chita D. Date Harbay El 24002		
Additional Directors: Joseph L. MJohn Ales oscato, Dmilri Adler and Kurt Frahn all at the Palm Ha		- ah
Additional Directors, Joseph E. Wijonit Ales oscalo, Direct Ader and Adit Franti all at the Paim Ha	TOOL REGIES	> 200° ve
FFICERS		PR
Virginia A. Long	44	<u>+</u>
<sub>s:</sub> 2999 Palm Harbor Blvd, Suite B, Palm Harbor, FL 34683	Pit J	300
		ö
resident: Mike Capito	9	<u></u>
2999 Palm Harbor Blvd, Suite B, Palm Harbor, FL 34683		
Mike Capito		
2000 Palm Harbor Blvd Suite B. Dalm Harbor El 3/683	<del></del>	
97.		
irer:		<u></u>
555.		
E: If necessary, you may attach an addendum to the application listing additional officers and/or	directors.	
Virginia A. Long, Prosident		
Signature of Pirector or Officer  Signature of Pirector or Officer  fficer or director signing this document (and who is listed in number 12 show) affirms that the fa	cts stated h	crein
to and that he or she is aware that false information submitted in a document to the Department of degree follows as provided for in \$.817.155, F.S.		
/irginia A. Long, President:		
(Turned as printed name and superity of nerson signing multisation)		

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## Delaware

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PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEPHROLOGY CARE GROUP, 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 THIRTEENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEPHROLOGY CARE GROUP, INC." WAS INCORPORATED ON THE ELEVENTH DAY OF DECEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE
BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

5447080 8300

150352758

You may verify this certificate online at corp.delaware.gov/authver.shtml AUTHENTY CATION: 2196805

DATE: 03-13-15

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