## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

#### FOREIGN PROFIT/NONPROFIT CORPORATION

Advanced Practice Strategies, Inc.

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11/13/2015 9:44:48 AM From: To: 8506176383( 2/6 )

#### **COVER LETTER**

TO: Registration Section Division of Corporations					
A DV A NOED, DD A COLOR STRATEG	ies, inc,				
Name of corporation - must include suffix					
Dear Sir or Madam:					
The enclosed "Application by Foreign Corporation	n for Authorization to Transact Business in Florida," I Standing" and check are submitted to register the susiness in Florida.				
Please return all correspondence concerning this r	natter to the following:				
Yuliya Bashylava					
Nam	ne of Person				
ADVANCED PRACTICE STRATEGIES, INC.					
Firm	/Company				
470 Atlantic Avenue					
	Address				
Boston, MA 02210					
•	tate and Zip code				
ybashylava@aps-web.com	used for future annual report notification)				
E-man address; (to be	asso for future affidar report nouncations				
For further information concerning this matter, ple	oase call:				
Yuliya Bashylava , 617	275-7233				
Name of Person at (Area	Code Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration 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 & ☐ \$87.50 Filing Fee, Certified Copy 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.

l. ADVANCED I	PRACTICE STRATEGIES, INC.		•
(Enter name of c	Corporation; must include "INCORPORATED, Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
APS I, INC.	•		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
2. Delaware	3.	26-0664507	
	ry under the law of which it is incorporated)	(FEI number, if appl	icable)
4	5,	Pernetual	
(Date	of incorporation)	(Date of duration, if other th	an perpetual)
6			•
		n Florida, if prior to registration) 502, F.S., to determine penalty Hability)	)
7.470 Atlantic Ave	nue, Sulte 1400, Boston, MA 02210		
	(Princip	pal office address)	
	(Current mailir	ng address, if different)	
D. N.		, , , , , , , , , , , , , , , , , , ,	· 🚎
8. Ivame and stree	et address of Florida registered agent: (P.C	J. Box NOT acceptable)	<b>5</b>
Name:	CT Corporation System	-	<b>₹</b>
Office Address:	1200 South Pine Island Road		
	Plantation, FL 33324	, Florida	
	(City)	(Zip code)	
9. Registered age	ent's acceptance:	•	
Having been nam	ved as registered agent and to accept servi		
	application, I hereby accept the appoint omply with the provisions of all statutes r		
	familiar with and accept the obligations o		perjormance of my
•	CT Corporation S	ystem	
	Withen shadd		
By:	Chilly Will Katey Jud		··-
′	(Registered a	gent's signature)	

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.

### 11. Names and business addresses of officers and/or directors:

A. DIREC	TORS			•
Chairman:	SEE ATTACHMENT	٠	. '	
Address;				
	an;			
Address:		·		
<del></del>				
Director:				····
		-		
Director;				
B. OFFIC	ERS	Ţ\$.	_	
	EB ATTACHMENT	100 A	5 25	
		SYII.	- y-	n B Danier (B
		642 -	ယ်	į.
		<u> </u>		777
	nt:	DR.	<del>t.</del>	
Address:		236	<u>-</u>	<del></del>
				<u>-</u>
Secretary: _			<del></del> -	
Address:				
Treasurer: _			<del></del> -	<del></del>
Address:				
NOTE: If	pocessary, you may attach an addendum to the application listing additional officers and	or direc	ctors.	
12	Signature of Director or Officer			
are true and	or director signing this document (and who is listed in number 11 above) affirms that the that he or she is aware that false information submitted in a document to the Department of the form in s.817.155, F.S.			
13. Hugh M	1erryweather Treasurer			<del></del>
	(Typed or printed name and capacity of person signing application)			

### **OFFICERS**

Hugh Merryweather	Treasurer & Secretary	470 Atlantic Ave, Boston, MA 02210
Russ Richmond	President & CEO	470 Atlantic Ave, Boston, MA 02210
DIRECTORS		·
Russ Richmond	Director	470 Atlantic Ave, Boston, MA 02210
John Ambrose	Director	470 Atlantic Ave, Boston, MA 02210
Seth Blackley	Director	470 Atlantic Ave, Boston, MA 02210
Rik Vandevenne	Director	470 Atlantic Ave, Boston, MA 02210
Matt Herman	Director	470 Atlantic Ave. Boston, MA 02210

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ADVANCED PRACTICE STRATEGIES, 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 FIFTH DAY OF NOVEMBER, A.D.

2015.

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.

4393987 8300 SR# 20150795400

Authentication: 10370393

Date: 11-05-15

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