

Division of Corporations

Page 1 of 1

F1600004242

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000233276 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.
Account Number : 076077001702
Phone : (407) 841-1200
Fax Number : (407) 423-1831

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

Email Address: bconnolly@mcdco.com

FOREIGN PROFIT/NONPROFIT CORPORATION

MDC Management of Florida, Inc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

SEP 23 2016

S. YOUNG

Electronic Filing Menu

Corporate Filing Menu

Help

(((H16000233276 3)))

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.

MDC Management of Florida, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

MDC Management, Inc

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Georgia 3. _____
 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. March 17, 1994 5. _____
 (Date of incorporation) (Date of duration, if other than 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. 3715 Northside Parkway, Bldg. 200, Suite 700, Atlanta, GA 30327
 (Principal office address)
- _____ (Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Dean Mead Services, LLC

Office Address: 420 S. Orange Avenue, Suite 700
Orlando, Florida 32801
 (City) (Zip code)

9. 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.

Dean Mead Services, LLC

By: _____

Vicki L. Berman, VP

(Registered agent'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.

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15 SEP 22 AM 10:04
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(((H16000233276 3)))

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: John R. McDonald

Address: 3715 Northside Parkway, Bldg. 200, Suite 700

Atlanta, GA 30327

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. John R. McDonald

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

13. President _____

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

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 SEP 22 AM 10:04

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Control Number : K407203

STATE OF GEORGIA**Secretary of State**

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

MDC MANAGEMENT, INC.**a Domestic Profit Corporation**

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number	: 13413155
Date Inc/Amtd/Filed	: 03/17/1994
Jurisdiction	: Georgia
Print Date	: 09/19/2016
Form Number	: 211



Brian P. Kemp
Secretary of State

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850-817-8381

9/21/2016 10:03:14 AM PAGE 1/001 Fax Server



September 21, 2016

FLORIDA DEPARTMENT OF STATE

DEAN, MEAD, EGERTON, BLOODWORTH, CAPOVANO & BOZARTH, PA
Division of Corporations

SUBJECT: MDC MANAGEMENT, INC.
REF: W16000065123

16 SEP 22 AM 10:04
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L14000192531.

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H16000233276
Letter Number: 016A00020231

2016 SEP 22 PM 1:35
TALLAHASSEE, FLORIDA