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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (614)280-3338

Phone Fax Number

: (954)208-0845

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

Tesser Health, Inc.

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OCT 25 2016

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: TesserHealth, Inc.			
	oration - must include suffix		
Dear Sir or Madam:			
	जो को जिल्हा कर कर कर कर के किए	FALLAHA	
	me of Person	92E	48 W
Robinson,Bradshaw&Hinson,P.A		TAC	
Firm	n/Company 🤅	253	
1450RaleighRoad,Suite100	n/Company 0.		
	Address		
ChapelHill,NorthCarolina27517			
·	State and Zip code		
akhoshnevis@tesserhealth.com	16.7		
·	used for future annual report notification)		
For further information concerning this matter, pl	lease call:		
KristinM.Graham 919	328-8850	•	
	a Code Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tailahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Pogen.
Enclosed is a check for the following amount:			
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status		፟	

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.

Delaware 3. (State or country under the law of which it is incorporated) (FEI number, if applicable) September 27, 2016 5. (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Principal office address)	
September 27, 2016 (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1951NW7thAvenue, Suite 300, Miami, Florida 33136	
(Date of incorporation) (Date of duration, if other than perpetual) (Date lirst transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1951NW7thAvenue,Suite300,Miami,Florida33136	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1951NW7thAvenue,Suite300,Miami,Florida33136	
1951NW7thAvenue,Suite300,Miami,Florida33136	
(Principal office address)	ಕ
t and the second se	0007 2
(Current mailing address, if different)	F
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System	AM 10: 09
Tice Address:	
Plantation, Florida 33324 (Zip code)	

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. DIRECTORS Chairman: _ Address: Vice Chairman: ____ Address: __ AliKhoshevis Director: 1951NW7thAvenuc, Suite 300, Miami, Florida 33136 DavidGardner 122E.ChathamStreet,Suite301,Cary,NorthCarolina27511 **B. OFFICERS** RiyaadSeecharan 1951NW7thAvenue,Suite300,Miami,Florida33136 Vice President: ______ Humbertof.ee Secretary: 1951NW7thAvenue, Suite300, Miami, Florida33136 Address: AliKhoshevis Treasurer: 1951NW7thAvenue,Suite300,Miami,Florida33136 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. & Sachem 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.

RiyaadSeecharan,President

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

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TESSER HEALTH, 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 TWENTY-FIRST DAY OF OCTOBER, A.D. 2016.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TESSER HEALTH, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D. 2016.

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

6165385 8300 SR# 20166313678



Authentication: 203205173

Date: 10-21-16