

F17000001684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

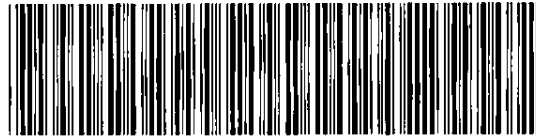
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2017 APR 13 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 APR 13 AM 7:15

OFFICE OF THE CLERK

K. SALY

APR 14 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 592305 4312830

AUTHORIZATION :

COST LIMIT :

\$ 70.00

ORDER DATE : April 10, 2017

ORDER TIME : 3:19 PM

ORDER NO. : 592305-005

CUSTOMER NO: 4312830

FOREIGN FILINGS

NAME: TENX HEALTHCARE, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____



TenX Healthcare, LLC
1351 Sawgrass Corporate Parkway, Suite 104
Sunrise, FL 33323

April 12, 2017

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32314

Re: Consent to Use of Name


Dear Sir/Madam:

The undersigned sole member of TenX Healthcare, LLC (the "*Company*") (L16000140853), wishes to register in Florida as a foreign corporation as TenX Healthcare, Inc. On behalf of TenX Healthcare, LLC, I, Kory Laszewski, certify that I am an officer of the sole member of the Company, and that as such, I am authorized to execute this letter on behalf of the Company.

I hereby certify that the Company gives its consent to its sole member, TenX Healthcare, Inc., a Delaware corporation, to use the name TenX Healthcare, Inc. as its corporate name in Florida.

Very truly yours,

TENX HEALTHCARE, LLC
By: TenX Healthcare, Inc., a Delaware corporation
(formerly Ten X Holdings, LLC, a Florida LLC)
Its: Sole Member

By: 
Kory Laszewski, President

**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.*

TenX Healthcare, Inc.

1. _____
(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)

Delaware

81-1547872

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

April 4, 2017

4. _____ 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)

1351 Sawgrass Corporate Parkway, Suite 104, Sunrise, FL 33323

7. _____
(Principal office address)

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee _____
_____, Florida _____
(City)

32301
(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.

Corporation Service Company

By: _____

(Registered agent's signature)

Melissa Zender
Asst. Vice President

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: _____

Director: Kory Laszewski

c/o TenX Healthcare, Inc.

Address: _____

1351 Sawgrass Corporate Parkway, Suite 104, Sunrise, FL 33323

Director: _____

Address: _____

B. OFFICERS

President: Kory Laszewski

c/o TenX Healthcare, Inc.

Address: _____

1351 Sawgrass Corporate Parkway, Suite 104, Sunrise, FL 33323

Vice President: _____

Address: _____

Secretary: Kenneth Condren

1351 Sawgrass Corporate Parkway, Suite 104, Sunrise, FL 33323

Address: _____

Treasurer: Ben Fillichio

1351 Sawgrass Corporate Parkway, Suite 104, Sunrise, FL 33323

Address: _____

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

12.  _____

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. Kory Laszewski, 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 "TENX HEALTHCARE, 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 TENTH DAY OF APRIL, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TENX HEALTHCARE, INC." WAS INCORPORATED ON THE FOURTH DAY OF APRIL, A.D. 2017.

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

2017 APR 13 PM 7:15
RECEIVED
OFFICE OF THE SECRETARY OF STATE



6370081 8300

SR# 20172399212

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202354203

Date: 04-10-17