

5/4/2017

Division of Corporations

**FI700002067**

Florida Department of State  
Division of Corporations  
Economic Planning and Development

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

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

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (512)418-6949  
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.\*\***

Email Address: \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION**  
**NCHS Holdings, Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

2017 MAY -5 AM 9:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA2017 MAY -5 P 3:20  
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TALLAHASSEE, FLORIDA

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D. BRUCE  
MAY 08 2017

# 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.

1. NCHS Holdings, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. California 3. 26-4542780  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 02/23/2009 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. 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354  
(Principal office address)  
24747 Redlands Blvd., Suite B, Loma Linda, CA 92354  
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(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.

By: Linda Stauffer Linda Stauffer  
(Registered agent's signature) Assistant Secretary

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Fred Copeland

Address: 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354

Director: J. Vaughan Curtis

Address: 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354

Director: David Espinosa, 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354

**B. OFFICERS**

President: John Thievon

Address: 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Norma Castaneda

Address: 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354

Treasurer: Robert Thomson

Address: 24747 Redlands Blvd., Suite B, Loma Linda, CA 92354

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

12. Norma Castaneda, Secretary  
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. Norma Castaneda, Secretary

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

**FILED**  
2017 MAY -5 P 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# State of California Secretary of State

## CERTIFICATE OF STATUS

**ENTITY NAME:**

NCHS HOLDINGS, INC.

**FILE NUMBER:** C3189678  
**FORMATION DATE:** 02/23/2009  
**TYPE:** DOMESTIC CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 03, 2017.

ALEX PADILLA  
Secretary of State