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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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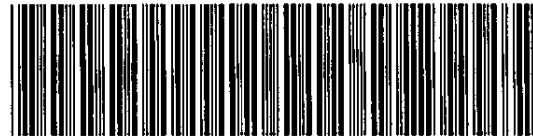
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
17 MAY 30 AM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

JUN 5 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sano Informed Prescribing, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Leighton Liles

Name of Person

Sano Informed Prescribing, Inc.

Firm/Company

393 Nichol Mill Ln, Suite 34

Address

Franklin, TN 37067

City/State and Zip code

leighton@thinksano.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

leighton@thinksano.com

Name of Person

at (615) 491-2822

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 & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**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. Sano Informed Prescribing, Inc.

(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)

2. Delaware 3. 46-2126914

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 1/30/2013

(Date of incorporation)

5. _____

(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. 393 Nichol Mill Ln, Suite 34, Franklin, TN 37067

(Principal office address)

(Current mailing address, if different)

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

Name: Northwest Registered Agent, LLC.

Office Address: 3030 N. Rocky Point Dr. STE 150A

Tampa

(City)

, Florida 33607

(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.



Northwest Registered Agent, LLC.

Tom Glover

- Assistant Secretary

(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Murray Blackshear

Address: 9635 Stanfield Rd.

Brentwood, TN 37027

Vice Chairman: Tim Ryan

Address: 1671 North, 350 West

Greenfield, IN 46140

Director: Douglas Ryan

Address: 153 Comerstone Cir

Franklin, TN 37064

Director: Jeffrey Rothenberger

Address: 9 Colonel Winstead

Brentwood, TN 37027

B. OFFICERS

President: Timothy Ryan

Address: 1671 North, 350 West

Greenfield, IN 46140

Vice President: Scott Daniels

Address: 9664 Brunswick Dr

Brentwood, TN 37027

Secretary: Douglas Ryan

Address: 153 Comerstone Cir, Franklin, TN 37064

Treasurer: Leighton Liles

Address: 3500 Foxhall Rd, Nashville, TN 37215

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

12. Leighton Liles Leighton Liles

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. Leighton Liles Leighton Liles

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

FILED
MAY 30 AM 5:05
TALLAHASSEE, FLORIDA

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT "SANO INFORMED PRESCRIBING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE THIRTIETH DAY OF JANUARY, A.D. 2013, AT 5:09 O'CLOCK P.M.

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME FROM "PARACELSDUS CIP, LLC" TO "SANO INFORMED PRESCRIBING, LLC", FILED THE TWENTY FIRST DAY OF MAY, A.D. 2013, AT 3:27 O'CLOCK P.M.

CERTIFICATE OF CONVERSION, CHANGING ITS NAME FROM "SANO INFORMED PRESCRIBING, LLC" TO "SANO INFORMED PRESCRIBING, INC.", FILED THE THIRTIETH DAY OF DECEMBER, A.D. 2014, AT 2:06 O'CLOCK P.M.


AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF CONVERSION IS THE FIRST DAY OF JANUARY, A.D. 2015 AT 12:01 O'CLOCK A.M.



5282073 8310

SR# 20173886196

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202584119

Date: 05-24-17

Delaware

The First State

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CERTIFICATE OF INCORPORATION, FILED THE THIRTIETH DAY OF
DECEMBER, A.D. 2014, AT 2:06 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE
AFORESAID CERTIFICATE OF INCORPORATION IS THE FIRST DAY OF
JANUARY, A.D. 2015 AT 12:01 O'CLOCK A.M.


RESTATED CERTIFICATE, FILED THE TENTH DAY OF AUGUST, A.D. 2016,
AT 5:59 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID
CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE
AFORESAID CORPORATION, "SANO INFORMED PRESCRIBING, INC.".

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

FILED
17 MAY 30 AM 5:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Jeffrey W. Butlock, Secretary of State

5282073 8310

SR# 20173886196

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

Authentication: 202584119

Date: 05-24-17