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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

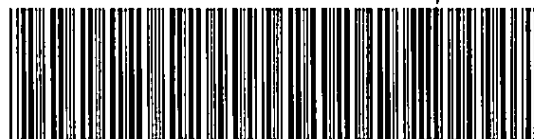
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 OCT 30 A 9:23

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PENSACOLA, FLORIDA 32591-2347

WILLIAM V. LINNE, J.D., LL.M.
FLORIDA BAR BOARD CERTIFIED IN TAXATION
GARY W. HUSTON, J.D., LL.M.
FLORIDA BAR BOARD CERTIFIED IN TAXATION
JAN E. LANGFORD, J.D.

October 25, 2017

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Primary Care South, INC
Letter No.: 517A00019619

Dear Sir or Madam:


We are in receipt of your letter dated September 28, 2017, a copy of which is attached. As requested in the attached letter, we are enclosing an Application by Foreign Corporation for Authorization to Transact Business in Florida signed by the Registered Agent.

It is our understanding that no further action from our side is required in order to qualify this corporation to transact business in Florida. Please do not hesitate to let us know if you require anything further.

Any questions you may have regarding this filing may be directed to our attention at the contact information provided above.

Thank you for your assistance.

Very truly yours,


Vlad Mokrenko, FRP
Paralegal to William V. Linne

:vim
Enclosures
cc: Charles Hare (via email)

Z:\CLIENTS\Primary Care South Inc\LTR - FL Dept of State - Qualify.wpd

FILED OCT 30 2017

2017 OCT 30 PM 3:46

FILED OCT 30 A-9-23
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2017

CHARLES R HARE, JR
PO BOX 1669
ALBERTVILLE, AL 35950

SUBJECT: PRIMARY CARE SOUTH, INC.
Ref. Number: W17000077253

We have received your document for PRIMARY CARE SOUTH, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 517A00019619

2017 OCT 30 PM 8:46

RECEIVED

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2017 OCT 30 A 9:23

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Primary Care South, 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:

Charles R. Hare, Jr.

Name of Person

Gullahorn & Hare, Jr.

Firm/Company

P.O. Box 1669

Address

Albertville, Alabama 35950

City/State and Zip code

chare(@)gullahornhare.com

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

For further information concerning this matter, please call:

Charles R. Hare, Jr.

at (256)

\$78-1891

Name of Person

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

2017 OCT 30 A 9:23
TALLAHASSEE, FLORIDA
STATE OF FLORIDA

FILED

**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. Primary Care South, 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. Alabama

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

3. _____

(FEI number, if applicable)

4. _____

(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. 328 Highland View Drive, Birmingham, Alabama 35242

(Principal office address)

328 Highland View Drive, Birmingham, Alabama 35242

(Current mailing address, if different)

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

Name: William V. Linne

Office Address: 17 West Cedar Street, Suite 3

Pensacola

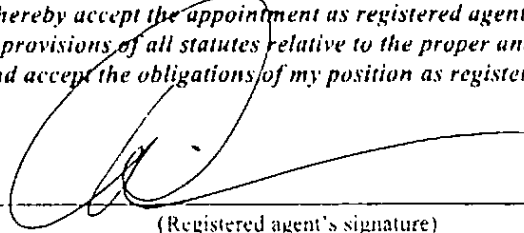
(City)

, Florida 32502

(Zip code)

9. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated corporation as the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity
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.*



(Registered agent's signature)

William V. Linne, Registered Agent

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.

FILED
OCT 30 1983
TALLAHASSEE
FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Michael T. Patton

Address: 328 Highland View Drive

Birmingham, Alabama 35242

Director: Amanda T. Patton

Address: 328 Highland View Drive

Birmingham, Alabama 35242

B. OFFICERS

President: Michael T. Patton

Address: 328 Highland View Drive

Birmingham, Alabama 35242

Vice President: _____

Address: _____

Secretary: Amanda T. Patton

Address: 328 Highland View Drive, Birmingham, Alabama 35242

Treasurer: Michael T. Patton

Address: 328 Highland View Drive, Birmingham, Alabama 35242

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. Michael T. Patton, President

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

FILED
2011 OCT 30 A 9:23
TALLAHASSEE, FLORIDA

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Primary Care South, Inc. was formed in Marshall County, Alabama on September 7, 2017. The Alabama Entity Identification number for this entity is 402-916. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20170921000030412

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

09/21/2017

Date

John H. Merrill

Secretary of State

FILED
OCT 30 A 9 24
TALLAHASSEE, FLORIDA