

F8000004789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

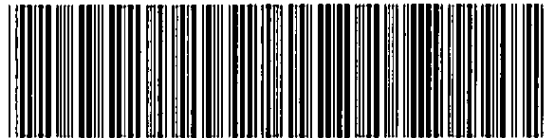
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300319784033

OCT 22 A 6:32

FILED

18 OCT 22 PM 2:02

FILED

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

ACCOUNT NO. : I20000000195

REFERENCE : 451758 8066554

AUTHORIZATION :

COST LIMIT : \$ 10.00

ORDER DATE : October 19, 2018

ORDER TIME : 1:30 PM

ORDER NO. : 451758-005

CUSTOMER NO: 8066554

FOREIGN FILINGS

NAME: MEDICAL MARKETING MANAGEMENT,
LTD.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

FILED
OCT 22 A 6:32

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Medical Marketing Management, LTD
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:

Langston Jones
Name of Person
Medical Marketing Management, LTD
Firm/Company
26261 Evergreen Rd, Suite 450
Address
Southfield MI 48076
City/State and Zip code
LJONES@HOMERMEDICAL.COM
E-mail address: (to be used for future annual report notification)

FILED
OCT 22 A 6:31

For further information concerning this matter, please call:

Nan Acemy at (248) 228-2253
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:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,
Certificate of Status &
Certified Copy |
|---|--|---|---|

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. Medical Marketing Management, LTD, Inc
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Michigan 3. 38-2639160
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-3-85 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. 8/10/18
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 26261 Evergreen Rd. Suite 450 Southfield MI 48076
(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 32301
(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.

Corporation Service Company
By: Roxanne Turner
(Registered agent's signature)
Roxanne Turner
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.

FILED
OCT 22 A 6:32

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

A. DIRECTORS

Chairman: Langston Jones

Address: 26261 Evergreen Rd Suite 450
Southfield MI 48076

Vice Chairman: N/A

Address: _____

Director: Frank Phillips

Address: 26261 Evergreen Rd. Suite 450
Southfield MI 48076

Director: Issac Vaughn

Address: 26261 Evergreen Rd Suite 450
Southfield MI 48076

B. OFFICERS

President: Frank Phillips

Address: 26261 Evergreen Rd Suite 450
Southfield MI 48076

Vice President: N/A

Address: _____

Secretary: Langston Jones

Address: 26261 Evergreen Rd Suite 450 Southfield MI 48076

Treasurer: Langston Jones

Address: 26261 Evergreen Rd Suite 450 Southfield MI 48076

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

12. [Signature]

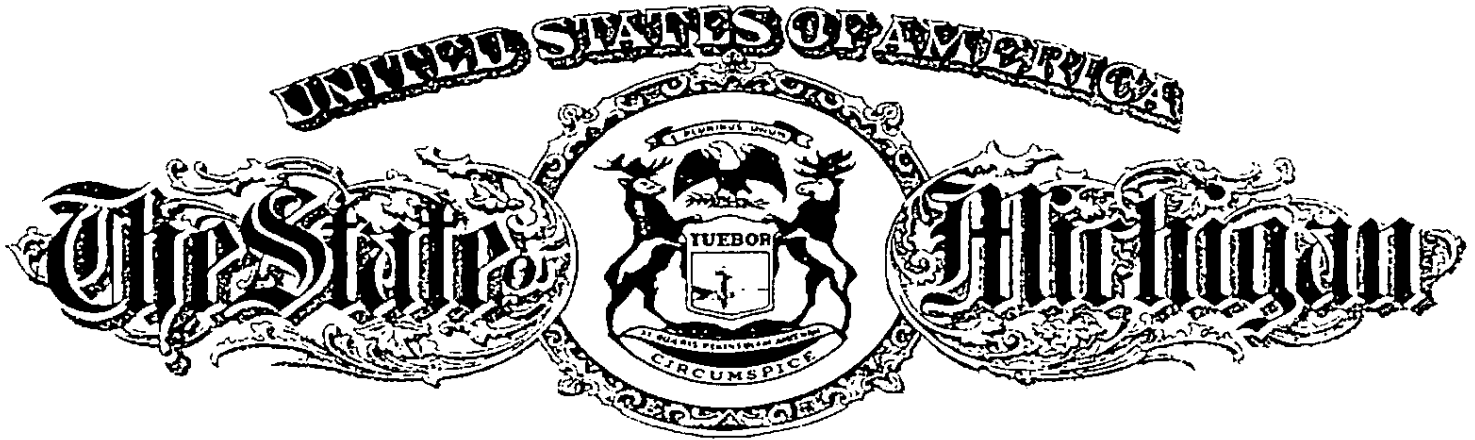
Signature of Director or Officer

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. LANGSTON JONES, CHAIRMAN & CEO

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

FILED
OCT 27 A 6:32



Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

MEDICAL MARKETING MANAGEMENT, LTD.

was validly incorporated on October 4, 1985 as a Michigan DOMESTIC PROFIT CORPORATION,
and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284 to attest to the fact that the corporation
is in good standing in Michigan as of this date and is duly authorized to transact business and for no other
purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit
given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 18108713780

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 19th day of October, 2018.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau