

F18000005177

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 5, 2018

SHEILA EISENBERG, ESQ
1 PARK AVE., 3RD FL
NEW YORK, NY 10016

SUBJECT: NYU LANGONE MSO, INC.
Ref. Number: W18000096739

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RECEIVED

OFFICE
OF THE
CLERK
OF THE
SUPREME
COURT
JANUARY
2019

We have received your document for NYU LANGONE MSO, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN PROFIT CORPORATION, but your entity is a FOREIGN NON-PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 918A00022712

Corrected

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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XX CERTIFIED COPY

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FOREIGN

NYU LANGONE MSO, INC.

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

file 1st

(Please have fict
filed when

this is
completed)

ADDITIONAL INSTRUCTIONS:

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS
IN THE STATE OF FLORIDA:

1. NYU LANGONE MSO, INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like
import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained
in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. New York

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

3. 84-452860

(FEI number, if applicable)

4. 2/26/2018

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 550 First Avenue, 15th fl., NY, NY 10016

(Principal office address)

One Park Ave., 3rd fl, NY, NY 10016

(Current mailing address)

8. Support of the medical schools operated by New York University

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Dr., Suite A

Tallahassee

(City)

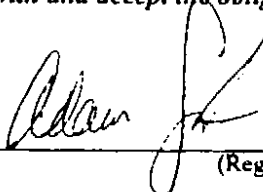
Florida

32301

(Zip Code)

10. 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.



Adam Saldana, Asst. Secretary

(Registered Agent's signature)

11. 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.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Andrew Brotman, MD

Address: 550 First Avenue

New York, NY 10016

Vice Chairman: _____

Address: _____

Director: Daniel Widawsky

Address: 550 First Avenue

New York, NY 10016

Director: Richard Donoghue

Address: 550 First Avenue

New York, NY 10016

B. OFFICERS

President: Andrew Brotman, MD

Address: 550 First Avenue

New York, NY 10016

Vice President: _____

Address: _____

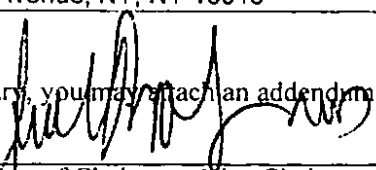
Secretary: Annette Johnson, Esq.

Address: 550 First Avenue, NY, NY 10016

Treasurer: Daniel Widawsky

Address: 550 First Avenue, NY, NY 10016

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

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Andrew Brotman, MD, President

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

**State of New York
Department of State**

} ss:

I hereby certify, that the Certificate of Incorporation of NYU LANGONE MSO, INC. was filed on 02/26/2018, under the name of NYU LANGONE LONG ISLAND MSO, INC., as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A certificate changing name to NYU LANGONE MSO, INC. was filed on 10/11/2018.

I further certify that no other documents have been filed by such corporation.

WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 08th day of November two
thousand and eighteen.

[Signature]

Brendan W. Fitzgerald
Executive Deputy Secretary of State