Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit member

(shown below) on the top and bottom of all pages of the document

(((H19000007943 3))).

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: BLALOCK, WALTERS, HELD & JOHNSON, P.A.

Account Number : 076666003611 Phone

: (941)748-0100

Fax Number

: (941)745-2093

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA PROFIT/NON PROFIT CORPORATION

MMH Practice Management Corp.

5 · · · · · ·	
Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H19000007943 3)))

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. MMH Practice Management Corp. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Ina," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Plorida, enter alternate corporate name adopted for the purpose of transacting business in Florida) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transnated business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 375 Boca Ciega Point Blvd., St. Petersburg, FL 33708 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable). Blalock Walters, P.A. Name: 802 11th Street West Office Address: Bradenton 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. Blalock Walters P. A.

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.

(((H19000007943 3)))

1. Names and dusiness addresses of officers and/or directors:		
A. DIRECTORS Thomas Montefinese Chairman:	•	
375 Boca Ciega Foint Blvd., St. Petersburg, PL 33708		
.ddress:		
Christopher McGill Tice Chairman:		
ddress: 7629 Silverwood Court, Lakewood Ranch, FL 34202		
uuress:		
Bryant Headley, Ir. Director:	·····	
Address: 14703 Bassett Ln. San Antonio, TX 78231		
		
Director:		
Addresss:		
industrial in the second of th		
B. OFFICERS Thomas Montafinesc resident: 375 Boca Ciega Point Bivd., St. Petersburg, FL 33708		<u> </u>
Address:	70	1 9 J.
Vice President:	<u>F</u> 5F	Z
Address:		
	- 4.7 - 4.2 - 4.4	껿
Christopher McGill	25 28	- 121
7629 Silverwood Court, Lakewood Ranch, FL 34202	T.A.	
Bryant Headiey, Jr.		<u> </u>
14703 Bassett La., San Antonio, TX 78231 Address:		
NOTE: If necessary, you may attach an aptendum to the application listing additional officers and/or dire		
	201015.	
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 are true and that he or she is aware that false information submitted in a document to the Department of St a third degree felony as provided for in s:817.155, F.S. Thomas Montefinese, Chairman and President	stated here ate constitu	án ites
(Typed or printed name and capacity of person signing application)		

(((H190000Q7943 3)))

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MMH PRACTICE MANAGEMENT CORP." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MMH PRACTICE MANAGEMENT CORP." WAS INCORPORATED ON THE NINTH DAY OF NOVEMBER, A.D. 2018.

7133701 8300

SR# 20190075377

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

Authentication: 202025291

Date: 01-04-19