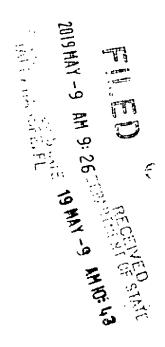
# F19000002248

(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



200329166502



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 755573 5033395

AUTHORIZATION : Smell A

COST LIMIT : \$ (87) 50

ORDER DATE: May 8, 2019

ORDER TIME : 6:39 PM

ORDER NO. : 755573-005

CUSTOMER NO: 5033395

#### FOREIGN FILINGS

NAME: PROMPTCARE FLORIDA, INC.

XXXX\_ QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

## **COVER LETTER**

TO:	Registration Sec Division of Corp				
CHDI	•	re Florida, Inc.			
SUDJ	EC1:	Name of corporat	ion - must	include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence	on by Foreign Corporation  " or "Certificate of Good Son corporation to transact bus	Standing":	and check are subi	
Please	return all correspo	ondence concerning this ma	itter to the	following:	
Thoma	is Voorhees, Preside	nt			
		Name	of Person		
Promp	tCare Florida, Inc.				
<del>-</del>		Firm/C	ompany		
41 Spr	ing Street, Suite 103				
		Ac	ldress		
New	Providence, NJ 079	74			
		City/Stat	e and Zip	code	
Tom.V	oorhees@promptca	re.net			
	-	E-mail address: (to be use	ed for futu	re annual report no	otification)
For fur	ther information o	concerning this matter, pleas	se call:		
Thoma	s Voorhees	732	692	-2747	
	Name of Person	at ( Area C	) Code	Daytime Telepho	one Number
Enclos	Registration Sec Division of Corp Clifton Building 2661 Executive ( Tallahassee, FL	orations Center Circle		MAILING AD Registration Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations
	0.00 Filing Fee	★\$78.75 Filing Fee & Certificate of Status		5 Filing Fee & fied Copy	■ \$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.

	orporation; must include "INCORPORATED	O," "COMPANY," "CORPORATION,"					
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")						
(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting b	usiness in Florida)				
Delaware	2	83-4221228					
	y under the law of which it is incorporated)	(FEI number, if applicable)					
February 21, 20	19	perpetual 5.					
· <del></del>	of incorporation)	(Date of duration, if other tha	n perpetual)				
Not Applicable							
··		in Florida, if prior to registration)	<del>-</del>				
11 5 5		1502, F.S., to determine penalty liability)	20				
	eet, Suite 103 New Providence, NJ 07974		2019 HAY				
	(Principal office address)						
· , <u></u>			1AY -9				
	(Current mail	ling address, if different)	to t				
			4 9: 2 EE, FL				
. Name and stree	et address of Florida registered agent: (P	O. Box NOT acceptable)					
	Corporation Service Company		(27 0.				
Name:							
	1201 Hays Street						
Name: Office Address:	· · · · · · · · · · · · · · · · · · ·	22301					
	Tallahassee (City)	, Florida					

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### 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: Gary Sherman, 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.

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

	ECTORS Thomas Voorhees		
Chairman	41 Spring Street, Suite 103 New Providence, NJ 07974		
Address:	41 Spring Street, Suite 103 New Providence, NJ 07974		
Vice Chai	Scott S. Plumridge		
	c/o The Halifax Group, 1133 Connecticut Avenue, N.W., Suite 700, Washington, DC 20036		
Director:	William James Cavanaugh		
Address:	c/o The Halifax Group. 1133 Connecticut Avenue, N.W., Suite 700. Washington, DC 20036		
Director:			
Address:			
B. OFF	Thomas Voorhees		
	41 Spring Street, Suite 103 New Providence, NJ 07974		
Vice Pres	Joseph Poliseo - Chief Operating Officer and Asst. Secretary	2019 MA	क्स्प्रम
Address:	41 Spring Street, Suite 103 New Providence, NJ 07974	4Y -9	o g e same nessen d
Secretary:	Scott S. Plumridge	## 9:	
Address:	c/o The Halifax Group, 1133 Connecticut Avenue, N.W., Suite 700, Washington, DC 20036	26	
Treasurer:	Richard Martin - Chief Financial Officer		
Address:	41 Spring Street, Suite 103 New Providence, NJ 07974		
<b>NOTE:</b> 12	If necessary, you may attach an addendum to the application listing additional officers and/or dire	ctors.	
The offic	Signature of Director or Officer error director signing this document (and who is listed in number 11 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of Stagree felony as provided for in s.817.155, F.S.	stated he	rein itutes
13	omas Voorhees President		
	(Typed or printed name and capacity of person signing application)		

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PROMPTCARE FLORIDA, INC." 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 EIGHTH DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROMPTCARE FLORIDA, INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2019.

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

THE STATE OF THE S

Authentication: 202785700

Date: 05-08-19