

F190000002248

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

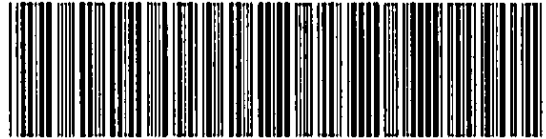
(Business Entity Name)

(Document Number)

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FEB 17 2023

S. PRATHEP

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PromptCare Florida, Inc

Name of Corporation

DOCUMENT NUMBER: F19000002248

The enclosed *Affidavit by Foreign Corporation to Change/Add Officer(s) and/or Director(s)* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dave Evans Attn: Finance

Name of Contact Person

PromptCare Companies, Inc.

Firm/Company

41 Spring Street Suite 103

Address

New Providence, NJ 07974-1143

City/State and Zip Code

finance@promptcare.net

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

For further information concerning this matter, please call:

Dave Evans

at (732) 692-2703

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for the following amount:

☐ \$35.00 Filing Fee ☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy (Additional
copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S)
AND/OR DIRECTOR(S)**

(Note: Applicable only during the first calendar year of qualification)

1. The name of the foreign corporation as it appears on the records of the Florida Department of State is:
PROMPTCARE FLORIDA, INC
2. This entity was authorized to transact business in Florida on 05/09/2019 and its Florida document
number is F19000002248
3. This corporation was formed under the laws of Delaware
4. The name and address of each officer and/or director is as follows:

Title:

ASCOO

Name and Address

Poliseo, Joseph Attn: Finance

41 Spring Street, Suite 103

New Providence, NJ 07974-1143

TCFO

Evans, David Attn: Finance

41 Spring Street, Suite 103

New Providence, NJ 07974-1143

CEO

Paul Jardina Attn: Finance

41 Spring Street, Suite 103

New Providence, NJ 07974-1143

(Attach additional pages if necessary)

Treasurer and CFO

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to:
Division of Corporations • PO Box 6327 • Tallahassee, FL 32314