orida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H190003095873)))



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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION

MedExpress Urgent Care North Carolina, P.C.

Certificate of Status	0
Certified Copy	1
Page Count	04
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October 21, 2019

FLORIDA DEPARTMENT OF STATE Division of Corporations

C T CORPORATION SYSTEM

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SUBJECT: MEDEXPRESS URGENT CARE NORTH CAROLINA, P.C.

REF: W19000093162

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections are refax the complete document, including the electronic filing cover sheet

Florida law does not provide for the recognition of a foreign professit corporation. An acceptable corporate suffix will need to be added to entity name for this Department to accept and file your documents.

Please return your document, along with a copy of this letter, within days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, Splead call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II FAX Aud. #: H19000309587 Letter Number: 119A00021684

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSA BUSINESS IN FLORIDA

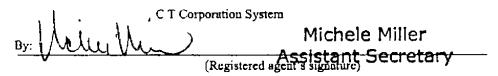
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

MedExpress Urgent Care North Carolina, P.C., Inc.

1.				
	orporation; must include "INCORPORATED, lorp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,	-	
North Carolina	able in Florida, enter alternate corporate name	81-5138747	business in Flo	rida,
2. (State or countr 01/25/2017	y under the law of which it is incorporated) 5.	(FEI number, if app	licable)	
	of incorporation)	(Date of duration, if other the	nan perpetual)	
423 Fortress Blvd		n Florida, if prior to registration) 502, F.S., to determine penalty liability	n :	20
-	~ 	oal office address)	→ 100 → 100 → 100 >	BOCT
	(Current maili	ng address, if different)	507	Ξ
3. Name and <u>stree</u> Name:	et address of Florida registered agent: (P.C C T Corporation System	O. Box <u>NOT</u> acceptable)	OF STAIL	PH 12: 04
Office Address:	1200 South Pine Island Road		τ.	, 27
	Plantation,	, Florida		
	(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 indesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capabilither agree to comply with the provisions of all statutes relative to the proper and complete performance of midules, and I am familiar with and accept the obligations of my position as registered agent.



10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this applicate the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisc under the law of which it is incorporated.

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are true and that he or she is aware that false information submitted in a document to the Department of State const a third degree felony as provided for in s.817.155, F.S.
David R. Ferrell, M.D. President

President 13.

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



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (PROFESSIONAL CORPORATION)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do he certify that

MEDEXPRESS URGENT CARE NORTH CAROLINA, P.C.

is a professional corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 25th day of January, 2017, with its period of duration being Perpetual.

I FURTHER certify that the said corporation's articles of incorporation are no suspended for failure to comply with the Revenue Act of the State of North Carolin the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that the said corporation certificate of registration is not suspended or revoked by their licensing board; and the said corporation has not filed articles of dissolution as of the date of this certific





Scan to verify online.

Certification# 105683246-1 Reference# 15629130- Page: 1 of 1 Verify this certificate online at http://www.sosne.gov/verification

IN WITNESS WHEREOF, I have hereunto my hand and affixed my official seal at the of Raleigh, this 14th day of October, 2019.

Elaine I Marshall

Secretary of State