

10/22/21, 11:36

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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H21000393935ABC2

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (514)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: \_\_\_\_\_

2021 OCT 22 PM 12:18

TALLAHASSEE FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION****MindCare Solutions Group, Inc.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

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Sig  
10/25/21

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.

DocuSign Envelope ID: 82731280-5038-4A1C-9EBC-5E0653446D25

## II. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman David Weiss, M.D.Address: 5314 Maryland Way, Brentwood, TN 37027

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: David Weiss, M.D.Address: 5314 Maryland Way, Brentwood, TN 37027

Director: \_\_\_\_\_

Address: \_\_\_\_\_

## B. OFFICERS

President: David Weiss, M.D.Address: 5314 Maryland Way, Brentwood, TN 37027

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** attach an addendum to the application listing additional officers and/or directors.12. David Weiss, M.D. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. David Weiss, M.D. \_\_\_\_\_

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

2021 OCT 22 PM 6:20

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MINDCARE SOLUTIONS GROUP, 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 TWENTY-FIRST DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

2021 OCT 22 PM 6:20



5374373 8300

SR# 20213583129

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 204479790

Date: 10-21-21