

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000284688 3)))



H220002846883ABC7

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)617-6383		2022
	rax wamber : (000/017-0303		·
From:			•
	Account Name : REGISTERED AGENTS IN	NC.	స్త
	Account Number : I20090000081		_
	Phone : (307)200-2803 Fax Number : (855)330-1010		P:
	187 Manual . (927) 20-1010		P;1 4:
	er the email address for this business en annual report mailings. Enter only one en		
a S S S	annual report mailings. Enter only one en	mail address pl	.ease.**
a S S S	annual report mailings. Enter only one enter the state of	corporatio	.ease.**
a ح ا ا	annual report mailings. Enter only one en	corporatio	.ease.** DN
a 52 55 Wd - 1 3 7	annual report mailings. Enter only one enter the state of	corporatio	.ease.**
a E S S S S S S S S S S S S S S S S S S	ennual report mailings. Enter only one enter the Email Address: FOREIGN PROFIT/NONPROFIT (Confidant Texas, P.A.)	corporation.	.ease.** DN
a E S S S S S S S S S S S S S S S S S S	FOREIGN PROFIT/NONPROFIT Confidant Texas, P.A	CORPORATIO	ON S. FRANKLI

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.

. Confident Texas P A

under the law of which it is incorporated.

Toyac	able in Florida, enter alternate corporate name adop		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicab	le)
00/00/00	VOO		
(Date	of incorporation) 5	(Date of duration, if other than pe	erpetual)
·	,	·	•
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502,	rida, if prior to registration) F.S., to determine penalty liability)	
7901 4th	St N STE 300 St. Petersburg	g FL 33702	
	(Principal office <u>st</u>		1007
7901 4th	St N STE 300 St. Petersburg	FL 33702	
	(Current mailing ad	dress, if different)	ري
Nama and stra	et address of Florida registered agent: (P.O. Bo	ov. MOT accontable)	31 PH 4: 34
	Northwest Registered Agent LLC	•	منت التا
Name:		••	ب
fice Address:	7901 4th St N STE 300	_	_
	St. Petersburg	Florida 33702	
	(City)	(Zip code)	
aving been nam signated in this	ent's acceptance; ed as registered agent and to accept service of application, I hereby accept the appointment omply with the provisions of all statutes relati with and accept the obligations of my position	as registered agent and agree to a ve to the proper and complete perj	ict in this capaci

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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

A. DIRECTORS							
□Chairman	Name: Michael Buxbaum	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
X Director	7901 4th St N STE 300	□Director	_				
⊠ President	St. Petersburg FL 33702	□President					
□Vice President	1, 2, 1	□Vice President					
⊠ Secretary	▼Treasurer	□ Secretary		□Treasurer			
□Other	□Other	□Other		□Other			
□Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	□Secretary		☐Treasurer			
□ Other	Other	□Other		Other E			
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:	P11 4:			
Director		□Director		بر. بي پي			
□President		□President					
□Vice President		□Vice President		··-			
□Secretary	☐Treasurer	☐Secretary		□Treasurer			
□Other		□Other		□Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Floridy Department of State Annual Report form. 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 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.

Dr. Michael Buxbaum, President

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

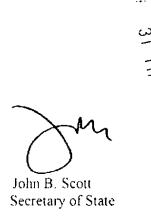
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CONFIDANT TEXAS, P.A. (file number 804676445), a Professional Association, was filed in this office on August 08, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 17, 2022.





Come visit us on the internet at https://www.sos.texas.gov

Fax: (512) 463-5709