

Rogers, T. W., et al. May 1986

Tallahassee, Florida	32301
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only.

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. GNA Performance Solutions, L.L.C.
(Corporation Name) (Document #)

2. _____
 (Corporation Name) (Document #)

3. _____ (Corporation Name) _____ (Document #) _____
 -04/26/00--01036
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4. _____
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☐ Certificate of Status

NEW FILINGS	
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	NonProfit
✓	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/QUALIFICATION	
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	Limited Partnership
	Reinstatement
	Trademark
	Other

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Examiner's Initials

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. GNA PERFORMANCE SOLUTIONS, LLE
(Name of foreign limited liability company)
2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Applied For
(FEI number, if applicable)
4. 4-10-00
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease exist or "perpetual")
6. May 1, 2000
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 3599 University Boulevard, South, Suite B
Jacksonville, Florida 32216
(Street address of principal office)

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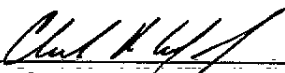
8. If limited liability company is a manager-managed company, check here ☒

9. The usual business addresses of the managing members or managers are as follows:

3599 University Boulevard, South, Suite B
Jacksonville, Florida 32216

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: To provide
rehabilitation consulting services.


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Charles R. Curley, Jr., Authorized Representative
Typed or printed name of signee

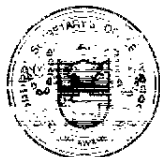
State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GNA PERFORMANCE SOLUTIONS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF APRIL, A.D. 2000.

3210280 8300

001206130



A handwritten signature in black ink, reading "Edward J. Freel", is written over a horizontal line.

Edward J. Freel, Secretary of State

0396481

AUTHENTICATION:

04-24-00

DATE:

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

GNA PERFORMANCE SOLUTIONS, LLC

2. The name and the Florida street address of the registered agent and office are:

ALLAN T. GEIGER

(Name)

1301 Riverplace Boulevard, Suite 1500

Florida street address (P.O. Box **NOT** ACCEPTABLE)

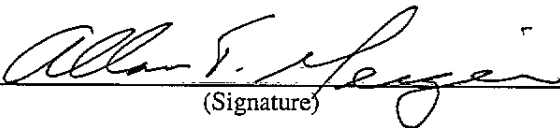
Jacksonville

FL

32207

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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