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ACCOUNT NO. : 072100000032

REFERENCE : 233687 5061379

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 125.00

ORDER DATE : July 23, 2001

ORDER TIME : 10:55 AM

ORDER NO. : 233687-005

CUSTOMER NO: 5061379

CUSTOMER: Langfred White, Esq
Icc Financial Group
32700 Us Highway 19 North

100004495381--7

Palm Harbor, FL 34684-3119

FOREIGN FILINGS

NAME: ICC HEALTH MANAGEMENT, LLC

QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER: *JB*
7-25-01

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TALLAHASSEE, FLORIDA

APPROVED
FILED

**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. ICC Health Management, LLC
(Name of foreign limited liability company)
2. State of Louisiana
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 72-1455918
(FEI number, if applicable)
4. September 23, 1999
(Date of Organization)
5. January 1, 2030
(Duration: Year limited liability company will cease to exist or "perpetual")
6. August 12, 2000
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 32700 U.S. Highway 19 North
Palm Harbor, FL 34684
(Street address of principal office)

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

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

Member: International Cooperative Consultants, Inc., d/b/a ICC Financial Group

32700 U.S. Highway 19 North, Palm Harbor, FL 34684

Managers: See attached

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TALLAHASSEE, FLORIDA

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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: _____

Management of health care facilities

Langfred W White as Asst. Secy
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.)

Langfred W. White, as Asst. Secretary/Sr. Vice President

Typed or printed name of signee

ATTACHMENT TO APPLICATION BY FOREIGN LIMITED LIABILITY
COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

ICC HEALTH MANAGEMENT, LLC

SOLE MEMBER:

International Cooperative Consultants, Inc.
d/b/a ICC Financial Group
32700 U.S. Highway 19 North
Palm Harbor, FL 34684

MANAGERS:

William Planes, Sr.
President/CEO/Director
854 Cypress Lake View Court
Tarpon Springs, FL 34689

Deborah Noll
Treasurer/Controller
4168 Amber Lane
Palm Harbor, FL 34685

William Planes, II
Vice President/Secretary/Director
4775 Collins Ave., #1505
Miami Beach, FL 33140

G. Earl Humphries, III
Executive Vice President
1030 Lake Drive
Woodworth, LA 71485

Regina M. Planes
Vice President/Director
854 Cypress Lake View Court
Tarpon Springs, FL 34689

David Mathes, III
Vice President
154 Mathes Lane
Effie, LA 71331

Steve E. Pallos
Director
10000 U.S. Hwy. 98 No., #972
Lakeland, FL 33809

James W. Keen
Director
3530 NW 89th Way
Hollywood, FL 33024

Langfred W. White
Assistant Secretary/Senior Vice President
2094 Ashbury Drive
Clearwater, FL 33764

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

ICC Health Management, LLC

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

Corporation Service Company
(Name)

1201 Hays Street
Florida street address (P.O. Box NOT ACCEPTABLE)

Tallahassee FL 32301
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..

Patricia Pignatelli
(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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TALLAHASSEE, FLORIDA

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UNITED STATES OF AMERICA
State of Louisiana

Jox McKeithen
SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

ICC HEALTH MANAGEMENT, L.L.C.

Domiciled at ALEXANDRIA, LOUISIANA,

Were filed in this Office and a Certificate of Organization
was issued on September 23, 1999,

I further certify that no Certificate of Dissolution has
been issued.

*In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on,*

July 23, 2001
Jox McKeithen

ABA 34841646K
Secretary of State



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TALLAHASSEE, FLORIDA