

NAME: S. G. Inc.  
Requester's Name

526 F. Park Ave  
Address

Tallah, FL 32381  
City/State/Zip Phone #

**M02000001370**

Office Use Only

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

- |    |                    |              |  |
|----|--------------------|--------------|--|
| 1. | (Corporation Name) | (Document #) | 200003829052-2<br>-03/09/01--0119--015<br>***160.00 ***160.00    |
| 2. | (Corporation Name) | (Document #) | <u>ADM - 1,050</u><br><del>5501-5625</del>                       |
| 3. | (Corporation Name) | (Document #) | 200003829052-2<br>-05/31/02--01004--004<br>***1050.00 ***1050.00 |
| 4. | (Corporation Name) | (Document #) |  |

- |                                    |                                       |   |
|------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Walk in   | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy       |
| <input type="checkbox"/> Mail out  | <input type="checkbox"/> Will wait    | <input type="checkbox"/> Certificate of State |
| <input type="checkbox"/> Photocopy |                                       |   |

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02 MAY 30 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ 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

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

M02-1370  
5/30

Examiner's Initials GA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 13, 2001

NRAI SERVICES, INC.  
% MEDSTAFF CAROLINAS LLC  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301

SUBJECT: MEDSTAFF CAROLINAS, LLC  
Ref. Number: W01000005625

We have received your document for MEDSTAFF CAROLINAS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the additional page that was not enclosed with your original application.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 001A00015236

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 17, 2001

NRAI SERVICES, INC.  
% MEDSTAFF CAROLINAS LLC  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301

SUBJECT: MEDSTAFF CAROLINAS, LLC  
Ref. Number: W01000005625

We have received your document for MEDSTAFF CAROLINAS, LLC and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1050.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 301A00022540

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

June 20, 2001

NRAI SERVICES, INC.  
% MEDSTAFF CAROLINAS LLC  
526 E. PARK AVENUE  
TALLAHASSEE, FL 32301

SUBJECT: MEDSTAFF CAROLINAS, LLC  
Ref. Number: W01000005625

This letter is in response to the application by foreign corporation for authorization to transact business in Florida that was previously submitted to this office for MEDSTAFF CAROLINAS, LLC.

The referenced application states that the corporation has transacted business in the State of Florida since December 1, 2000. You were notified by letter dated April 17, 2001, that because of failure to obtain a certificate of authority prior to transacting business in the State of Florida, the corporation is liable for \$1050.00 in appropriate fees and penalties as set forth in Section 607.1502(4), Florida Statutes, (copy enclosed).

Until a response is received by this office concerning the prior notification, the application by foreign corporation for authorization to transact business in Florida will not be processed. If erroneous information was reflected on the previously submitted application, a sworn affidavit may be filed stating the correct date the corporation first transacted business in Florida, that the corporation did not transact business in Florida prior to the application filing year and that the information entered on such application is incorrect. Any such affidavit will be included with your original qualification documents.

Please provide your response to this letter within 30 days to avoid the necessity of further action.

If you have further questions concerning the filing of your document, please telephone the Foreign Qualification/Tax Lien Section at (850) 487-6051.

Gretchen Harvey  
Document Specialist Supervisor Letter No. 901A00037469

Enclosure

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TALLAHASSEE, FLORIDA

**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. MEDSTAFF CAROLINAS LLC  
(Name of foreign limited liability company)
2. NORTH CAROLINA  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 06-1602647  
(FEI number, if applicable)
4. 12/01/2000  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. 12/01/2000  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 8215 Forest Point Blvd., Suite 110  
Charlotte, NC 28273-5668  
(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:  
RICHARD C. DAVIS, 8215 Forest Point Blvd, Charlotte, NC 28273  
FREDERICK C. DAVIS, 8215 Forest Point Blvd, Charlotte, NC 28273  
Glenda Tallent, 8215 Forest Point Blvd, Charlotte, NC 28273
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:

CONTRACT NURSING

F. C. Davis E.V.P

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.)

FREDERICK C. DAVIS

Typed or printed name of signee

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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:

MedStaff Carolinas, LLC

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

NRAI Services, Inc.

(Name)

526 E. Park Avenue

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

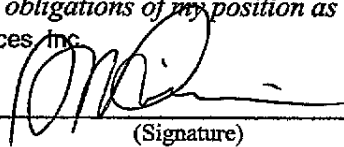
Tallahassee

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..*

NRAI Services, Inc.



(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



# NORTH CAROLINA

## Department of The Secretary of State

### CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that

#### **MEDSTAFF CAROLINAS, LLC**

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 1st day of December, 2000, with its period of duration ending 12/04/2098.

I **FURTHER** certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto  
set my hand and affixed my official seal at the  
City of Raleigh, this 22nd day of January, 2001.

*Elaine F. Marshall*  
Secretary of State