00000204 To: Florida division of corporation

From: Neil P. Morandi

MedExpress Urgent Care, LLC

To whom it may concern,

Please find enclosed an application for foreign LLC registration of MedExpress Urgent Care, LLC.

Also enclosed, please find a check for \$160.00 to cover the appropriate costs as listed below, per your fee schedule:

\$100.00 --filing fee for application

\$ 25.00--designation of registered agent

\$ 30.00--for one certified copy

5.00--for one certificate of status

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You may return the copies of the above requested materials to the address of the resident agent, as listed on the application.

Please contact Neil Morandi with any questions you may have while working on this application.

Sincerely,

Neil Morandi 561-776-6100

****160.00

****160.00

~ 1.27 644, 671



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 26, 2002

NEIL MORANDI 5 MONTEREY POINTE DRIVE PALM BEACH GARDENS, FL 33418

SUBJECT: MEDEXPRESS URGENT CARE, LLC

Ref. Number: W02000021588

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TALLAHASSES, TI MRITTA

We have received your document for MEDEXPRESS URGENT CARE, 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):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filling year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 102A00045428

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

	COMPLIANCE WITH SECTION 608:503, FLORIDA STATUTES, THE FULLOWING IS SUBMITTED TO REGISTER A FUREIGI ITTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	Med Express ungest care, LLC (Name of foreign limited liability company)
2.,	Jeva 2 a Jurisdiction under the law of which foreign limited liability 3
	company is organized)
4.	7-10-02 5. 2027
	7-10-2 (Date of Organization) 5. 2027 (Duration: Year limited liability company will cease to exist or "perpetual")
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7.	1021 STITE Rd 7
	Rojel Palm Boach FL 334/1 (Street address of principal office)
	(Street address of principal office)
8.	If limited liability company is a manager-managed company, check here 🗌 👚 🗸 🗸 🗢
0	The name and arrival business addresses of the managing members on managers are as fallower.
9.	The name and usual business addresses of the managing members or managers are as follows:
	Neil R. MoRandi
	5 MONTEREY POINTE DRIVE
	5 MONTEREY POINTE DAINE Pula Beach Gardens, FL 33418
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:
_	Medical Clivic
	On a V man 1)
	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.)
	Typed or printed name of signee

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.

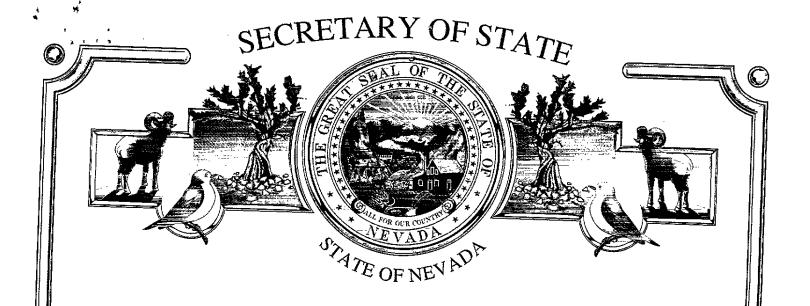
1. The name of the Limited Liability Company is:		
MedExpress URGENT CARE, LLC		
2. The name and the Florida street address of the registered agent and office are: $\frac{1}{2}$		
Neil P. Maradi	O2 AUG	
OP DY	çi İ	indian Consti
Florida street address (P.O. Box NOT ACCEPTABLE)	AM 9:	E Day
Palm Beach Gardens FL 33418 (City/State/Zip)	38	

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.

neil 1. Monardi (Signature)

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

160.00



LIMITED-LIABILITY COMPANY CHARTER

I, DEAN HELLER, the Nevada Secretary of State, do hereby certify that MEDEXPRESS URGENT CARE LIMITED LIABILITY COMPANY did on July 10, 2002, file in this office the Articles of Organization for a Limited-Liability Company, that said Articles are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain the provisions required by the laws governing Limited-Liability Companies in the State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office in Carson City, Nevada, on **July 10, 2002**.

Secretary of State

By Laurie Freeman

Certification Clerk