Page 1 of 2

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : THE KIRWAN LAW FIRM

Account Number : 120020000151 Phone : (407)210-6622 Fax Number : (407)540-9484

FOREIGN LIMITED LIABILITY COMPANY

Doctors' Defense Fund, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

JIVISION OF CORPORATION

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

IN COMPLIANCE WITH SECTION BIRSOS, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

DOCTORS' D	EFENSE FUND, LLC	and the second second				
i e	(Name o	foreign limited liabili	ty company)			
Delaware	and the second s	3 36	-45325	75	L	
(Jurisdiction under the	he law of which foreign limited impany is organized)	liability	(FEI number	, if applicable)		. =
May 16, 2003		5 2050			-	, in the same
(Date	of Organization)	(Duratio	on: Year limited li exist or "pi	ability company wil expetual*)	cease to	
Upon qualifica					- · · · · ·	
•	e first transacted business in Flo	orida. (See sections but	5.501, 506.502, an	B 817, 100, 5.8.3		
7800N. Unive	ersity Drive #200	<u> </u>	<u> </u>			±्राट क्रमांची तरक
Tamarac, Flor	the state of the s	et address of principal	office)		<u> </u>	النظاء باليد عابي
		•				
l. If limited liabilit	ty company is a manager-r	nanaged company,	check here 🗹	:		
. The name and u	sual business addresses of	the managing men	ibers or manag	ers are as follows	s ⊋«	ස
Martin Lesse	r, M.D.	Alan Schwa	ntz, M.D.	<u> </u>		
782 N. Univ	ersity Drive, #200	8393 W C	akland Par	K Bivd.		
Tamarac, Flo	rida 33321	Sunfise,	Florida.	33351	SE SE	8 PH
	and the second s	vs s	<u> </u>	ا المور يودي الم	_ Ev	
	nal certificate of existence, no mo					0
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I. Nature of busin	iess or purposes to be conc	lucted or promoted	in Florida:			e :
Investments		数 a 读	g wysen e web		<u></u>	
					5 2.	-
	Signature of a member (In accordance with section 60 an atternation under the ponal				э <i>э</i> ,	
	Martin Lesser, M.D.	1/17/17	L			
		r printed name of a	a nee			,

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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:

Martin Lesser, M.D.

DOCTORS' DEFENSE FUND, LLC

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

Tarnarac

FL Florida 33321

(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 cupacity. I further agree to comply with the provisions of all statutes relatively to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my postion 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) Delaware

PAGE 1

H03000216292 0

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DOCTORS' DEFENSE FUND, LLC" IS DILLY 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 NINETEENTH DAY OF MAY, A.D. 2003.



Warriet Smith Hindson
Harriot Smith Windson, Secretary of State
AUTHENTICATION: 2423688

DATE: 05-19-03 H03000216292 6

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