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2004 MAY -4 P 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Heritage Provider Services, LLC  
711 S. Carson Street  
Suite 4  
Carson City, NV 89701

April 30, 2004

Florida Department of State  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs:

Enclosed you will find our application by a foreign Limited Liability Company for authorization to transact business in Florida, our Certificate of Designation of Registered Agent, our Nevada Certificate of Existence with Status in Good Standing, and our check for filing fees in the amount of \$125.00.

Sincerely,



Gene C. Ennis

FILED  
2004 MAY -4 P 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FL

**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. Heritage Provider Services, LLC  
(Name of foreign limited liability company)
2. Nevada  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 73-1639271  
(FEI number, if applicable)
4. 5-7-02  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. anticipate 6-1-04  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 711 S Carson St. #4  
Carson City, Nevada 89701  
(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:  
James Davis 711 S Carson St. #4  
Carson City, Nevada 89701

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: Health care provider network marketing

Gene C. Ennis  
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.)

Gene C. Ennis  
Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2004 MAY -4 3:31

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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:

Heritage Provider Services, LLC

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

Gene C. Ennis

(Name)

410 43rd St. W. Ste N

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

Bradenton, FL 34209

(City/State/Zip)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 MAY -4 P 3:38

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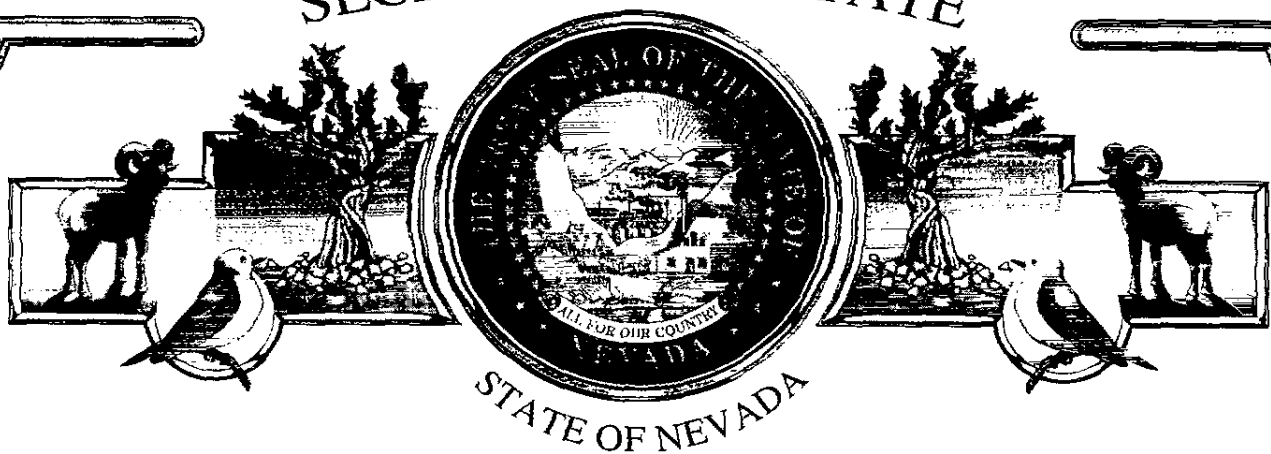
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.*

Gene C. Ennis

(Signature)

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

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **HERITAGE PROVIDER SERVICES, LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 25, 2002, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on April 28, 2004.

*Dean Heller*

DEAN HELLER  
Secretary of State

By

*Joann Dixon*  
Certification Clerk