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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Na	me)
(Di	ocument Number)) .
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MCMC LLC (Name of L	imited Liability Company)	
	Liability Company for Authorization to Transact Be submitted to register the above referenced foreign	
Please return all correspondence concerning this	s matter to the following:	
Gib Smith, JD		en.
	Name of Person)	OF HAY 12
MCMC LLC		福麗
. ((Firm/Company)	R ORPO
5272 River Road, Suit	te 650	FOF STATEOUS ORFORATIONS
	(Address)	9 45
Bethesda, MD 20816		
	/State and Zip Code)	
For further information concerning this matter,	please call:	
Gib Smith, JD	at (301) 652-1818	
(Name of Person)	(Area Code & Daytime Telephone Numbe	r)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sum \\$125.00 \text{ Filing Fee} \sum \\$130.00 \text{ Filing Fee} \text{ Certificate}		ertificate Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of	Foreign Limited Liability	Company)	
Delaware	3.	14-1847542	
(Jurisdiction under the law of which foreign company is organized)	limited liability	(FEI number, if applicat	ile)
9/18/2002	5.	perpetual	
(Date of Organization)	(D	uration: Year limited liability comp st or "perpetual")	any will cease to
not applicable			
(Date first transac (See sections 608.5	ted business in Florida, if 01 & 608.502 F.S. to dete	prior to registration.) rmine penalty liability)	96 INIS
88 Black Falcon Ave., Suite	353, Boston, MA	02210	A LONG
			12
	(Street Address of Prin	cipal Office)	宝
If limited liability company is a man	nager-managed comp	any, check here	06 HAY 12 AH 11: 29
The name and usual business addre	sses of the managing	members or managers are as	
Please see attached sheet.			
). Attached is an original certificate of existence e jurisdiction under the law of which it is organ	nized. (A photocopy is not		
inslation of the certificate under oath of the tran	,		
nstation of the certificate under oath of the trans. Nature of business or purposes to	be conducted or prom	oted in Florida: Medical B	II Review,
			ill Review,
1. Nature of business or purposes to			ill Review,
Telephonic Case Managements Signature of a m (In accordance with s	ent; Utilization Rent; utiliza		
Telephonic Case Management Signature of a m	ent; Utilization Rent; utiliza	ed representative of a membe execution of this document constitutes the facts stated herein are true.)	-

Member List

Manager - A	Address
JOSEPH HAWKE	201 King of Prussia Road, Radnor, PA 19087
ROBERT REISLEY	2501 Panama Street, Philadelphia, PA 19103
ROBERT BROWN	201 King of Prussia Road, Radnor, PA 19087
DAVID PEGG	201 King of Prussia Road, Radnor, PA 19087
GRACE ANN MONACO	874 Monument Drive, Montross, VA 22520
PETER GOLDSCHMIDT	5800 Madaket Road, Bethesda, MD 20816
MICHAEL LINDBERG	88 Black Falcon, Suite 353, Boston, MA 02210

DIVISION OF CORPORATIONS

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.

MCMC LLC		
and the Florida street add	dress of the registered agent and office	are:
Corporation Service Com	npany	06 HAV
	(Name)	
1201 Hays Street		5
Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	
•		
	Corporation Service Com	and the Florida street address of the registered agent and office Corporation Service Company (Name)

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, Florida Statutes.

By: Brian Courtney
(Signature) Asst. V. Pres.

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



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MCMC LLC" IS DULY 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 SIXTH DAY OF MAY, A.D. 2006.

DIVISION OF CORPORATIONS
OF WAY 12 AM 11: 29



Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 4725438

DATE: 05-06-06

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