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Special Instructions to Filing Officer:				
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G. MCLEOD OCT 14 2009 **EXAMINER** 



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#### **COVER LETTER**

то:	Registration Section Division of Corporations				
SUBJE	CT: PT Solutions Management, LLC  Name of Limited Liability Company				
The enc Existence	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of the, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.				
Please r	eturn all correspondence concerning this matter to the following:				
	Richard L. McBride, Jr.				
	Name of Person				
	Rushton, Stakely, Johnston & Garrett, P.A.				
	Firm/Company				
	Post Office Box 270				
	Address				
	Montgomery, Alabama 36101				
	City/State and Zip Code				
	rlm@rsjg.com				
	E-mail address: (to be used for future annual report notification)				
For furtl	ner information concerning this matter, please call:				
	Richard L. McBride, Jrat (334)206-3100				
	Name of Person Area Code & Daytime Telephone Number				
	MAILING ADDRESS:  Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301				
Enclos	ed is a check for the following amount:				
[	\$125.00 Filing Fee \$\ \tag{\$130.00 Filing Fee & Status}\$\$155.00 Filing Fee & \tag{\$160.00 Filing Fee, Certificate of Status}\$\$ 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:

1	PT Solutions Manage (Name of Foreign Limited Liability Company; must include "Limited Liability Company")	ment, LLC	<u> </u>	_
	(Name of Foreign Limited Liability Company; must include "Limi	ited Liability Company," "L.L.C.," or "LL	.C.")	
cons	ame unavailable, enter alternate name adopted for the purpose of transent of the managers or managing members adopting the alternate nampany," "L.L.C," "LLC.")			
2.	Alabama  urisdiction under the law of which foreign limited liability  3.			
<u>U)</u>	urisdiction under the law of which foreign limited liability ompany is organized)	( FEI number, if applicable)		_
4.	May 8, 2009 5. (Date of Organization) (Dur	Perpetual		
-	(Date of Organization) (Durexist	Perpetual ration: Year limited liability company will or "perpetual")	cease to	-
6.				
-	(Date first transacted business in Florida, if p (See sections 608.501 & 608.502 F.S. to determ	rior to registration.) nine penalty liability)	9	SE DIVIS
7. 9	6715 Taylor Court		<u>8</u>	왕왕 -
	Montgomery, Alabama 36117		<u></u>	무닭
-	(Street Address of Princi	pal Office)		- CC-5
8. I	f limited liability company is a manager-managed compar	ny, check here 🗸	AM III: 04	F STAT
9. 7	The name and usual business addresses of the managing m	nembers or managers are as follows	.: 120	ATTON:
	Rocky Barnes, 6715 Taylor Court, Montgomery, Alal	oama 36117		_
	Will Thames, 6715 Taylor Court, Montgomery, Alaba	ama 36117		_
				_
theju	Attached is an original certificate of existence, no more than 90 days old, our isolication under the law of which it is organized. (A photocopy is not actain of the certificate under cath of the translator must be submitted.)	tuly authenticated by the official having cus ceptable. If the certificate is in a foreign lan	tody of rec guage, a	cords in
11.	Nature of business or purposes to be conducted or promot	ted in Florida:		-
_	To provide physical therapy service	ces and treatment.		<u>.</u> .
	K/M/E	a_		
	Signature of a member of an authorized (In accordance with section 608, 08(3), F.S., the exe an affirmation under the penalties of perjury that the	ecution of this document constitutes		
	Rocky Barne	es		
	Typed or printed name o	f 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 Con	npany is:				
PT Solution	ns Management	LLC			
If unavailable, the alternate to be used in t	the state of Florida is:	:			
2. The name and the Florida street addres	s of the registered ag	ent and office are:			
	Danny Mayhan				
(Name)					
9717 Navarre Parkway Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	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, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Beth Chapman Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

# STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that PT Solutions Management, LLC organized in the office of the Judge of Probate of Montgomery County on May 8, 2009. I further certify that the records do not disclose that said PT Solutions Management, LLC has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

October 7, 2009

Date

Beth Chapman

of State

Beth Chapman

**Secretary of State**