M10000004012

(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



600184983726

10 SEP 10 PH 4: 14

TO SEP 10 AM 8: 35

B. KOHR

SEP 1 3 2010

EXAMINER



CORPORATION	SERVICE COMPANY.

ACCOUNT	NΟ		120000000199
MUCCOUNT	NO.	:	120000000133

REFERENCE: 505802

7477389

AUTHORIZATION

COST LIMIT

ORDER DATE: September 10, 2010

ORDER TIME : 2:31 PM

ORDER NO. : 505802-005

CUSTOMER NO: 7477389

FOREIGN FILINGS

NAME: GOLDEN SUN BEAR, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: "

CERTIFIED COPY _ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER:

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

IN COMPILANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
I. Golden Sun Bear, LLC (Name of Foreign Limited Liability Company; must include	
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C.," "LLC.")	of transacting business in Florida and attach a copy of the writte ate name. The alternate name must include "Limited Liability
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3.	(FEI number, if applicable)
• • •	Perpetual (Duration: Year limited liability company will cease to
6 N/A	exist or "perpetual")
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 601 Hawaii Street	
El Segundo, CA 90245	
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed c	ompany, check here
9. The name and usual business addresses of the management	ging members or managers are as follows:
RMS Lifeline Inc.	
601 Hawaii Street	
El Segundo, CA 90245	
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction tanker the law of which it is organized. (A photocopy is translation of the certificate under eath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	promoted in Florida:
Physician Practice Services / //	
Vando	
	Orized representative of a member. , the execution of this document constitutes that the forts stated herein are true.)
	on red perresantative

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	of the Limited Liability Company is:
Golden Sun	Bear, LLC
If name unava	ilable, the alternate name to be used in the state of Florida is:
2. The name a	and the Florida street address of the registered agent and office are:
	Corporation Service Company
	(Name)
	1201 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
	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.

Corporation Service Company Troy Todd

BY:

(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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GOLDEN SUN BEAR, 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 TENTH DAY OF SEPTEMBER, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GOLDEN SUN BEAR, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JULY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4849334 8300

100898666

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 8219966)

DATE: 09-10-10

You may verify this certificate online at corp.delaware.gov/authver.shtml