# M11000000194

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

Office Use Only



600190052676

01/14/11--01031--013 \*\*130.00

SECRETARY OF STATE TALL AHASSEE, FLORIDA

C. LEWIS

JAN 1 8 2011

EXAMINER

### COVER LETTER \*\*

TO: R	egistration Section Division of Corporations	₹Pi				
SUBJECT	F: HealthSmart Holdings II, LLC					
Name of Limited Liability Company						
		ability Company for Authorization to Transact Business in Florida," Coabove referenced foreign limited liability company to transact business				
Please retu	urn all correspondence concerning this r	natter to the following:				
	Jenn Alexinas					
		Name of Person				
	HealthSmart Holdings, Inc					
	Firm/Company ·					
	222 W. Las Colinas Blvd. Suite 600N					
Address						
	Irving, TX 75039		,			
		City/State and Zip Code				
	jenn.alexinas@healthsmart					
	E-mail address:	(to be used for future annual report notification)				
For further	r information concerning this matter, ple	ease call:				
Je	enn Alexinas	at (214 ) 574-3961				
_	Name of Person	Area Code & Daytime Telephone Number				
D R P	MAILING ADDRESS: Division of Corporations egistration Section O. Box 6327 allahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	is a check for the following amount is a check for the following a	Fee & \$\Bigsim\\$155.00 Filing Fee & \$\Bigsim\\$160.00 Filing Fee, Certificate				

## 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.	HealthSmart Holdings II, LLC.
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
,	TEXAS  (Jurisdiction under the law of which foreign limited liability  3. 27-1300475  (FEI number, if applicable)
	company is organized)
4.	November 11, 2009  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6.	(Date first transacted business in Florida, if prior to registration.)
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	222 W. LAS COLINAS BLVD. SUITE 600N
	IRVING, TX 75039  (Street Address of Principal Office)
	If limited liability company is a manager-managed company, check here
У.	The name and usual business addresses of the managing members or managers are as follows:  HealthSmart Holdings, Inc.
	222 W. Las Colinas Blvd., Stc. 600N
	Irving, TX 75039
the	<ol> <li>Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a unslation of the certificate under oath of the translator must be submitted.)</li> </ol>
11	1. Nature of business or purposes to be conducted or promoted in Florida: The transaction of any
	and all lawful business for which limited dability companies may be organized.
	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

James M. Pennington, President of HealthSmart Holdings, Inc.

Typed or printed name of 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 Co	ompany is:	
HealthSmart Holdings II, LLC.		
If unavailable, the alternate to be used in	n the state of Florida is:	
2. The name and the Florida street address	ess of the registered agent and office a	re:
Corporation Service Con		ZĎII IŠE TAL
	(Name)	ZDII JAN I II
1201 Hays Street		• • • • • • • • • • • • • • • • • • •
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	E F F S
Tallahassee	<sub>FL</sub> 32301	AM IO: 57 OF STATE E. FLORID
	City/State/Zip	<u> </u>

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

By Sonya Condell
(Signature)

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



222 West Las Colinas Boulevard Suite 600N | Irving Texas 75039 | (t) 214.574.3546 (f) 214.574.3911

January <u>7</u>, 2011

#### Dear Secretary of State:

We have enclosed the required documents evidencing our company's existence in its domestic state, Texas. Please be advised that Texas does not issue original certificates of this type but, rather, provides such documents via email.

Therefore, we have printed the certificate from email and have provided same herein. Thank you for your understanding.

Should you have any further questions or concerns, please contact me.

Sincerely,

Jenn Alexinas

HealthSmart Holdings, Inc.

222 W Las Colinas Blvd. Ste. 600N

Irving TX 75039

214.574.3961 (direct)

jenn.alexinas@healthsmart.com

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



### Office of the Secretary of State

#### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for HealthSmart Holdings II, LLC (file number 801192721), a Domestic Limited Liability Company (LLC), was filed in this office on November 11, 2009.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 04, 2011.



Hope Andrade Secretary of State