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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE
SALL AHASSEE: FLORID

J. BRYAN

NOV - 2 2011

EXAMINER

COVER LETTER

TO:

| ro: | Registration Section Division of Corporations | | | |
|---------|--|---|-----------------|------|
| SUBJI | C1 | pulation Medical Technologies, LLC ne of Limited Liability Company | | |
| | | lity Company for Authorization to Transact Business in Florida ove referenced foreign limited liability company to transact bus | | |
| Please | return all correspondence concerning this mat | ter to the following: | | |
| | Erika A. Easter | Name of Person | | |
| | | Name of Person | | |
| | Ungerlaw, PC | | | |
| | | Firm/Company | | |
| | 12121 Wilshire Boulev | | | |
| | | Address | 8 | 1 |
| | Los Angeles, CA 90025 | | NOV -1 PM 4: 25 | ILED |
| | | City/State and Zip Code | 2 2 | Li |
| | eteam@eminutes.co | om 📆 | 4 = | |
| | E-mail address: (to | be used for future annual report notification) | 25 | |
| For fur | ther information concerning this matter, pleas | e call: | | |
| | Erika A. Easter | at (310) 820-1000 | _ | |
| | 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 | | |
| | sed is a check for the following amoun \$\frac{1}{2}\$125.00 Filing Fee \$\frac{1}{2}\$130.00 Filing Fee Certificate of State | e & []\$155.00 Filing Fee & []\$160.00 Filing Fee, Certific | | |

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. Immediate Molecular Manipulation Medical Technologies, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
|---|
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") |
| 2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable) |
| 4. October 13, 2011 (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. 10960 Wilshire Boulevard, 5th Floor |
| Los Angeles, CA 90025 (Street Address of Principal Office) 8 If limited liability company is a manager managed company check here |
| 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: Health Chaplaincy, LLC, 2700 N. Ocean Drive, West Palm Beach, FL 33404 |
| 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 eath of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: Medical Technology |
| Marykiston |
| 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 |

Typed or printed name of signee

Marc Jacobson

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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:

Immediate Molecular Manipulation Medical Technologies, LLC

If unavailable, the alternate to be used in the state of Florida is:

| 2. The name and the Florida street address of the registered agent and office are: | ASS = | ر خ خ |
|--|--|-------------|
| eResidentAgent, Inc. | NOV RET | |
| (Name) | SSA - | |
| 236 E 6th Ave. | PR L | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | STATE OF THE PROPERTY OF THE P | |
| Tallahassee _{FL} 32303 | | |
| 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.

(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 "IMMEDIATE MOLECULAR MANIPULATION

MEDICAL TECHNOLOGIES, 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

SEVENTEENTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IMMEDIATE MOLECULAR MANIPULATION MEDICAL TECHNOLOGIES, LLC" WAS FORMED ON THE THIRTEENTH DAY OF OCTOBER, A.D. 2011.

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

11 NOV -1 PM 4: 25
SECRETARY OF STATE
TATL GHASSEF FOR STATE

5049475 8300

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Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 9095440

DATE: 10-17-11

You may verify this certificate onling at corp delaware conventions should be seen as the second sec