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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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B. KOHR

DEC 1 9 2011

**EXAMINER** 



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RECEIVED
11 DEC 20 PM 1: 52
DEPARTMENT OF STATE
INVISION OF CURPORATION





ACCOUNT NO. : I2000000195

REFERENCE: 032205 4308005

AUTHORIZATION :

COST LIMIT :

ORDER DATE: December 20, 2011

ORDER TIME : 11:03 AM

ORDER NO. : 032205-075

CUSTOMER NO: 4308005

#### FOREIGN FILINGS

NAME:

VANTAGE ONCOLOGY TREATMENT

CENTERS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER: \_\_\_\_\_

#### **COVER LETTER**

	tration Section ion of Corporations		120
SUBJECT:	/antage Oncology Treatment	Centers, LLC	7
_		ame of Limited Liability Company	
The enclosed " Existence, and	Application by Foreign Limited Lic check are submitted to register the	ability Company for Authorization to Transact Business in Florida," Cabove referenced foreign limited liability company to transact business	ertificate of s in Florida
Please return a	Il correspondence concerning this n	natter to the following:	
	Heather Papaleo		
		Name of Person	
	Pepper Hamilton LLP		
		Firm/Company	
	3000 Two Logan Square		
		Address	
	Philadelphia, PA 19103		
		City/State and Zip Code	
	papaleoh@pepperlaw.com		
	E-mail address:	(to be used for future annual report notification)	
For further info	ormation concerning this matter, ple	ease call:	
HEA'	THER PAPALEO	at (215 ) 981-4787  Area Code & Daytime Telephone Number	
	Name of Person	Area Code & Daytime Telephone Number	
Divisi Regist P.Q. E	ING ADDRESS: on of Corporations tration Section Box 6327 assee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Certified Copy

\$160.00 Filing Fee, Certificate

of Status & Certified Copy

Enclosed is a check for the following amount:

Certificate of Status

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

TRANSACT BUSINESS IN FLORIDA IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Vantage Oncology Treatment Centers, 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 (FEI number, if applicable) company is organized) 4 December 30, 2002 5 Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 1500 Rosecrans Ave, Suite 400, Manhattan Beach, CA 90266 (Street Address of Principal Office) 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: Vantage Oncology, LLC - 1500 Rosecrans Avenue, Suite 400, Manhattan Beach, CA 90266 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 oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Provide technical business and administrative support 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.)

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 Company is:

Centers, LLC
e used in the state of Florida is:
eet address of the registered agent and office are:
Inc.
(Name)
enue
ida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)
FL 32301 City/State/Zip
A agent and to accept service of process for the above stated limited signated in this certificate, I hereby accept the appointment as registered facity. I further agree to comply with the provisions of all statutes ete performance of my duties, and I am familiar with and accept the istered agent as provided for in Chapter 608, Florida Statutes.  Services  (Signature) Acres Carry Association  \$ 100.00 Filing Fee for Application  \$ 25.00 Designation of Registered Agent  \$ 30.00 Certified Copy (optional)  \$ 5.00 Certificate of Status (optional)

## Delaware

PACE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "VANTAGE ONCOLOGY TREATMENT CENTERS,
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 NINETEENTH DAY OF
DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

*3607734 8300* 

111307472

AUTHENTICATION: 9237727

DATE: 12-19-11

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