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12 HAY 21 PH 3: 44

B. BOSTICK
MAY 2 3 2012
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT:	AHB	Sales,	LLC
NI KIRGIR		,	

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida...

Please return all correspondence concerning this matter to the following:

	Randi Haluptzok							
			Name of Person				_	
	c/o Homeland HealthCare, Inc.							
			Firm/Company				_	
	825 Market St.,	Ste. 300						
			Address				_	
	Allen, TX 75013							
		С	ity/State and Zip Cod	e			_	
	randi.haluptzok						_	
	E-mail	address: (to be	used for future annua	al repor	t notification)			
For further infor	mation concerning this n	natter, please ca	ill:					
Ranc	li Haluptzok		at (469	ر ر	24-5213		12 H/	
	Name of Perso	on	Area Code & Daytin	ne Tele	phone Number	2.4.	12/	1
	ING ADDRESS:		REET ADDRESS:			Ω.α. Ω.α. Ω.α.α.α.α.α.α.α.α.α.α.α.α.α.α.		3 3
	n of Corporations		vision of Corporation	S		77	PM 3: 44	
	ation Section ox 6327		gistration Section ifton Building			23	ယ္	
	ssee, FL 32314		61 Executive Center	Circle		<u> </u>	-	
	, - 		Illahassee, FL 32301			A	4 -	
Enclosed is a	check for the following	ing amount:						
	Filing Fee \$130.0	0 Filing Fee & cate of Status	\$155.00 Filing F Certified Copy	Fee &	\$160.00 Filing of Status & Co			

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:

	AHB Sales, 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 wronsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")	
٠.	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 45-5085046 (FEI number, if applicable)	
1.	April 18, 2012 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
5.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	825 Market Street, Ste. 300	
	Allen, TX 75013 (Street Address of Principal Office)	
3.	(Street Address of Principal Office) If limited liability company is a manager-managed company, check here Principal Office Principal Off	i i rr
€.	The name and usual business addresses of the managing members or managers are as follows:	
	Homeland HealthCare, Inc.	
	623 Warket St., Ste. 300	
he	Allen, TX 75013 On Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recome 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.)	ds in
1	1. Nature of business or purposes to be conducted or promoted in Florida: any legal business	
	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.)	

Reba J. Leonard, Vice President

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:			
AHB Sales, 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:	TAL:	12	
CT Corporation System	E E	<u> </u>	en 1
(Name)	HASSE	12 HAY 21	£28.4
1200 South Pine Island Road	र्गिट्य	70	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	- FLORI	3: 44	(()
Plantation FL 33324	E DA	1	
Cíty/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.

Kimberly Baggett
Assistant Secretary

\$ 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 "AHB SALES, 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 SIXTEENTH DAY OF MAY, A.D. 2012.

12 MAY 21 PH 3: 44
SELAHASSEE, FLORIDA

5142089 8300

120572024

AUTHENTY CATION: 9577614

DATE: 05-16-12

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



May 7, 2012

RANDI HALUPTZOK 825 MARKET STREET SUITE 300 ALLEN, TX 75013

SUBJECT: AHB SALES, LLC Ref. Number: W12000025198

We have received your document for AHB SALES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 712A00013651

Barbara Bostick Regulatory Specialist II

www.sunbiz.org