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SECRETARY OF STATE
ALCAHASSEE, FLORIDA

Foreign Limited Liability Company Techota of Florida, LLC

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$125.00 |

B. KOHR

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EXAMINER

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AUG 2 8 2012

8/27/2012

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

| IN COMPLIANCE WITH A | SECTION 608.50B, FLORIDA STATUTE PANYTO TRANSACT BUSINESS IN THE S | S, THE POLLOWING IS SUBMITTED TO RECESTER A FOI STATE OF FLORIDA: | - 5 |
|--------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 1. Techota of Flori | da. LLC | • | 1 |
| (Name of Foreign I | Imited Liability Company; must include | le "Limited Linbility Company," "L.L.C.," or "LLC.") | 花形 |
| | | | <u> </u> |
| (if name unavailable, enter consent of the managers or Company," "L.L.C," "LLC | r manuging members adopting the alter: | e of transacting business in Florida and attach a copy of the waste name. The alternate name must include "Limited Llability | ritten y |
| 2. Delaware | 2 | , | |
| (Jurisdiction under the li- company is organized) | aw of which foreign limited liability | (FEI number, if applicable) | |
| 4. August 23, 2012 | 5. | Perpetual | |
| (Date of | Organization) | (Duration: Year limited liability company will coase to exist or "perpetual") | |
| б. | | | |
| | (Date first transacted business in Flor (See sections 508.501 & 608.502 P.S. t | ida, if prior to registration.) o determine penulty liability) | |
| 7. 176 Thompson | Lane, Sulte 103 | | |
| Maskalla Tanaa | 07044 | | |
| Nashville, Tenne | Street Address of | (Principal Office) | |
| | • | | |
| 8. If limited liability of | ompany is a manager-managed co | ompany, check here | |
| 9. The name and usual | business addresses of the manag | ing members or managers are as follows: | |
| Jean Robertson | - 176 Thompson Lane, Suite | 103, Nashville, Tennessee 37211 | |
| | 77 O Trioripodii Edito, Care | - Politonical Collina | |
| <u> </u> | | | |
| | | | |
| | | | |
| the jurisdiction under the law | ntificate of existence, no more than 90 day of which it is organized. (A photocopy is nder oath of the translator must be submitt | a old, duly authenticated by the official having custody of record not acceptable. If the certificate is in a foreign language, a ted.) | sin |
| 11. Nature of business | or purposes to be conducted or p | romoted in Florida: | |
| healthcare service | 208 | | |
| | 2 0 4 5 | | |
| · cd | Year Yolertean | Managine Member. | |
| | | on zed representative of a member. n of this document constitutes an affirmation under the | |
| penaliles of v | parlury that the facts stated herein are true. I | am aware that any false information submitted in a | |
| doomment to | the Department of State constitutes a f | hird degree felony as provided for in s.817.155, F.S.) | |
| ` <u>J</u> | ean Robertson, Managing Typed or printed no | | |
| | an Dalutto to Dada i | me or 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 Liabilit | ty Company is: |
|-----------------|--------------------------------------------------|-------------------------------------------------|
| Techota of Flor | rida, LLC | |
| If unavailable | e, the alternate to be use | ed in the state of Florida is: |
| 2. The name | and the Florida street a | address of the registered agent and office are: |
| | | |
| | C T Corporation System | ı · |
| | C T Corporation System | (Namo) |
| | C T Corporation System 1200 South Pine Island I | (Namo) |
| | 1200 South Pine Island F | (Namo) |
| | 1200 South Pine Island F | (Namo) |

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.

CJT Corporation System

(Signature)

Nathan S. Giffin Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

FL057 - 10/05/2010 C T System Online

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "TECHOTA OF FLORIDA, 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 TWENTY-SEVENTH DAY OF AUGUST, A.D. 2012.

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

5203107 8300

120972840

You may verify this certificate enline at corp. delaware.gov/authour.shtml

Jeffrey W. Bullock, Secretary of State

DATE: 08-27-12