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| (Re | equestor's Name) | |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

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COVER LETTER

| TO: | Registration Section Division of Corporations | | | | | |
|--------------------|--|--|---|---------------------|--|--------------|
| SUBJ | Starship H | ealth Technologi | es, LLC | | | |
| 00130 | | Name o | Limited Liability Com | ipany | | |
| | closed "Application by Forcince, and check are submitted | | | | | |
| Please | return all correspondence co | oncerning this matter t | o the following: | | | |
| | Wayne | W. Zachary, Ph.I | D . | | | |
| | ************************************** | | Name of Person | | APER SE | · 11 |
| Starship Health Te | | o Health Technol | ogies, LLC | | 2013 AUG -2 SECRETAS TALLAHASS | LED |
| | * | | Firm/Company | | | |
| | P.O. B | ox 266 | | | F STA | |
| | | | Address | | 57 | |
| | Fort Washington, PA 19034 | | | | | |
| | ************************************** | C | ty/State and Zip Code | | di bilance di di ce l'il de ce l | - |
| | wzach | ary@starshiphea | alth.com | | | |
| | ************************************** | E-mail address: (to be | used for future annual | report notification | n) | |
| For fur | ther information concerning | this matter, please ca | 11: | | | |
| | Wayne W. Zach | ary, Ph.D. | _{at (} 215 |) 559-75 | 514 | |
| | Name o | f Person | Area Code & Daytime | | | - |
| | MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 | Di Re Cl 26 | REET ADDRESS: vision of Corporations gistration Section fron Building 61 Executive Center Cit llahassee, FL 32301 | rcle | | |
| Enclo | sed is a check for the for the for the formula \$125.00 Filing Fee | ollowing amount: \$130.00 Filing Fee Certificate of State | | | 160.00 Filing Fee, (f Status & Certified | |

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 | Starship Health Technologies, LLC (Name of Foreign Limited Liability Company; must include "I | |
|-----------------|--|---|
| cons | name unavailable, enter alternate name adopted for the purpose of isent of the managers or managing members adopting the alternate impany," "L.L.C," "LLC.") | |
| 2. | Commonwealth of Pennsylvania 3. | 4039672 |
| (J | Jurisdiction under the law of which foreign limited liability company is organized) | (FEI number, if applicable) |
| 4. | 23 June, 2011 5. | perpetual |
| | (Date of Organization) | (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. | 23 June, 2013 | LEGE T |
| ٠ | (Date first transacted business in Florida (Sec sections 608.501 & 608.502 F.S. to d | , if prior to registration.) letermine penalty liability) |
| 7 | 1255 Tressler Drive | T 2 2 |
| | Fort Washington, PA 19034 | ORICE TO |
| - | (Street Address of Page 1997) | rincipal Office) |
| | The name and usual business addresses of the managin Wayne Zachary Starship Health Technologies, LLC | - |
| | 1255 Tressler Drive | |
| | Fort Washington, PA 19034 | |
| the ju trans | Attached is an original certificate of existence, no more than 90 days jurisdiction under the law of which it is organized. (A photocopy is slation of the certificate under oath of the translator must be submitted. Nature of business or purposes to be conducted or properties in Training and Information Technologies. Signature of a member of an author (In accordance with section 608.408(3), F.S., the execution penalties of perjury that the facts stated herein are true 1 as | not acceptable. If the certificate is in a foreign language, a ed.) moted in Florida: Research and Development es rized representative of a member. of this document constitutes an affirmation under the am aware that any false information submitted in a |
| | document to the Department of State constitutes a th | |
| | Wayne W. Zachary, Ph.[| J. |

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: | |
|--|----------|
| Starship Health 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: | |
| Janis Cannon-Bowers, Ph.D. | |
| (Name) | |
| 121 S. Brown Avenue | |
| Florida Street Address (P.O. Box NOT ACCEPTABLE) | |
| Orlando, FL 32801 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)

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

JULY 24, 2013

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

Starship Health Technologies, LLC

is duly organized as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth