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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: MediNcrease, LLC

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:

Patricia Dysart, Esq.			
Name of Person		_	
National Bill Audit Services, LLC			
Firm/Company		_	
150 153rd Avenue, Suite 303	23 ³⁰ 1	•	
Address			#37° #2====
St. Petersburg, FL 33708		SEP -	1 CO FACE
City/State and Zip Code	(5, 4, ; Y,	ص_	grande. Di
pdysart@nbasaudits.com		Ē	
E-mail address: (to be used for future annual report notification)	107% 107%	23	i

For further information concerning this matter, please call:

Patricia Dysart

719-6227 x 8

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

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

Delaware 3. 46-3621929 (FEI number, if applicable) (Operation) (FEI number, if applicable) (FEI number, if applicable) (FEI number, if applicable) (Operation) (Oper	LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN	<i>ITHE</i>	STATE OF FLORIDA:		
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LL.C.") If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LL.C." Delaware (Jurisdiction under the law of which foreign limited liability company is organized) Delaware (Jurisdiction under the law of which foreign limited liability company is organized) Delaware (Duration: Year limited liability company will cease to exist or "perpetual") Not yet transacting business, but intends to in the future. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 150 153rd Avenue, Suite 303 St. Petersburg, FL 33708 (Street Address of Principal Office) The name and usual business addresses of the managing members or managers are as follows: Linda J. Plaster, 150 153rd Avenue, Suite 303, St. Petersburg Linda J. Plaster, 150 153rd Avenue, Suite 303, St. Petersburg 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 manslation of the certificate under oath of the translator must be submitted.) 1. Nature of business or purposes to be conducted or promoted in Florida: To provide medical cost containment services.	1 MediNcrease, LLC		•		
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$oldsymbol{\psi}$	Signature of a member or an	n autl	norized representative of a r		
(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

Patricia Dysart

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.

	of the Limited Liability Company is: Cease, LLC			_
If unavailable,	the alternate to be used in the state of Florida is:			
2. The name a	and the Florida street address of the registered agent and office are:	PK	ಪ್ಪ	_
	Patricia Dysart, Esq.	1年 (中) 2世 (日)	器	2.2/2 (1.6/2)
	(Name)		P 19	College Made
	150 153rd Avenue, Suite 303		770	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	شعرار الم	<u> </u>	Francisco September 1
•	St. Petersburg _{FL} 33708	高斯	23	
	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.

Patricia Dysant
(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 "MEDINCREASE, 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 NINTH DAY OF SEPTEMBER, A.D. 2013.

13 SEP 19 AM ID: 23
TALL/HASSES FLORIDA

5394980 8300

131067335

DATE: 09-09-13

AUTHENTY CATION: 0721688

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