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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
JAN - 9 2019
A LUNT
W13-66886

Office Use Only

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11/27/13--01015--009 **125.00

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December 6, 2013

STEPHANIE CHEN 1000 PARK CENTRE BLVD. #136 MIAMI GARDENS, FL 33169

SUBJECT: CHEN MED, LLC Ref. Number: W13000066886

We have received your document for CHEN MED, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 313A00027856

Agnes Lunt Regulatory Specialist II

www.sunbiz.org



Personal and Confidential

December 23, 2013

Agnes Lunt Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: ChenMed, LLC, Referral Number: W13000066886

Per your request, attached please find the certificate of good standing issued on December 12, 2013.

Should you have any additional questions or concerns, please feel free to contact me at 305-628-6130 or michelle.martinez@chenmed.com.

Best Regards,

Michelle Martinez

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Chan Mad, LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica 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:	
Stephanie Chen Name of Person	
Name of Person	**************************************
Name of Ferson	.amercum
	1
T' 10	-37
1000 Park Centre Blvd, #136	44 معين م اور اور
Address	
Miami Gardens, FL 33169 City/State and Zip Code	
City/State and Zip Code	
leonor.rosario@chenmed.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Stephanie Chen at (305) 629-6130 Name of Person Area Code & Daytime Telephone Number	
Auto Codo de Bayanto Pelophono Namosi	
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations	
Registration Section Registration Section	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & \$\Bigcup \$155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate Copy 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:
1. Chen Med, 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. De lawarc (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-3929096 (FEI number, if applicable)
4. 10013013 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
Miami Gardens FL 33169
(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:
1000 Park Centre Blvd, #136 Miami Gardens, FL 33169
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: <u>Healthcare</u>
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.) Stephanie Chen 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:	
Chen Med, 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: Stephanie Chen (Name)	
Stephanie Chen	e mensus

Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Miami Gardens, FL 33169 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)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "CHENMED, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR REVOKED

SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED

TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENT HAS BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE FIRST DAY OF OCTOBER,

A.D. 2013, AT 1:26 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHENMED, LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2013.

5407772 8315

131416006

AUTHENTY CATION: 0980459

DATE: 12-13-13

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