

FEB 03 2015
S. YOUNG



**HUNTER
BUSINESS LAW**

813.867.2640

www.hunterbusinesslaw.com

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January 22, 2015

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: inSync Healthcare Solutions, LLC/ Application by Foreign Limited Liability Company
For Authorization to Transact Business in Florida

To Whom It May Concern:

Enclosed please find the following items:

1. Cover Letter for inSync Healthcare Solutions, LLC's Application for Authorization to Transact Business in Florida;
2. The Application by Foreign Limited Liability Company For Authorization to Transact Business in Florida;
3. Certificate of Designation of Registered Agent/Registered Office;
4. Delaware Certificate of Good Standing (**PLEASE NOTE**....the State of Delaware went to black and white certificates and the attached are original copies. NO hard copies will be forwarded. To alleviate any concerns about the authenticity of business entity certifications, the state has a web site where the authentication number on a certificate can be verified. That site is <http://www.state.de.us/corp/authver.shtml>); and
5. Check Number 1639 in the total amount of \$130.00 for the "Filing Fee & Certificate of Status."

Thank you for your attention to this matter.

Respectfully,

Katelyn J. Dougherty, CP
Certified Paralegal to Ajay K. Singh, Esq.

Enclosures

FILED
15 JAN 26 PM 4:10
TALLAHASSEE, FL 32314

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: inSync Healthcare Solutions, 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:

Ajay Singh

Name of Person

Hunter Business Law

Firm/Company

711 S. Howard Avenue / Suite 200

Address

Tampa, FL 33606

City/State and Zip Code

notices@hunterbusinesslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ajay Singh

Name of Contact Person

at (**813**)

Area Code

867-2640

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

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15 JAN 26 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. inSync Healthcare Solutions, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-2243284

(FEL number, if applicable)

4. 11/12/14

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8408 Benjamin Road

Tampa, FL 33634

(Street Address of Principal Office)

6. 8408 Benjamin Road

Tampa, FL 33634

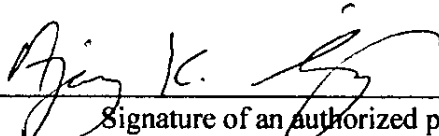
(Mailing Address)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Charles Hutchinson - 8408 Benjamin Road, Tampa, FL 33634

8. 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)



Signature of an authorized person

(In accordance with section 605.0203, 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.)

Ajay Singh

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

inSync Healthcare Solutions, 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:

Hunter Business Law

(Name)

711 S. Howard Avenue / Suite 200

Florida Street Address (P.O. Box NOT ACCEPTABLE)

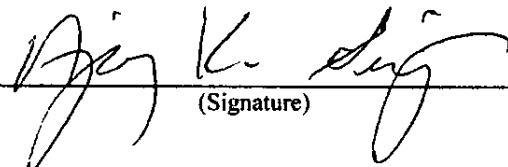
Tampa

FL 33606

City/State/Zip

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15 JAN 26 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 605, 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 "INSYNC HEALTHCARE SOLUTIONS, 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 NINETEENTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INSYNC HEALTHCARE SOLUTIONS, LLC" WAS FORMED ON THE THIRD DAY OF NOVEMBER, A.D. 2014.

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

FILED
15 JAN 26 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5632711 8300

150066139



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 2047993

DATE: 01-19-15
150066139