

M15000004911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

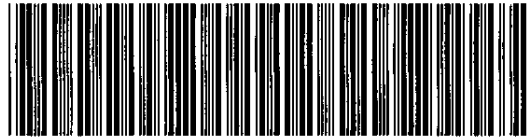
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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M1538420

FILED  
15 JUN 19 PM 1:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 JUN 23 10:28 AM

**EASTMAN & SMITH LTD.**

ATTORNEYS AT LAW

*Established 1844*

**Ann M. Bella**  
**Paralegal to Jeffrey D. Snively, Esq.**  
Direct Dial: 419-247-1611  
ambella@eastmansmith.com

One SeaGate, 24<sup>th</sup> Floor  
P.O. Box 10032  
Toledo, Ohio 43699-0032  
Telephone: 419-241-6000  
Facsimile: 419-247-1777

May 27, 2015

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

Re: **IES MedPlus of Kentucky, LLC**  
Our File No: C288/021581

Dear Sir/Madam:

Please find enclosed an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida with regard to the above-referenced limited liability company. Also enclosed is our firm's check to cover the cost of filing. Please process this application and return a file-stamped copy to me in the self-addressed, stamped envelope.

If you have any questions or concerns, please contact me at (419) 247-1611. Thank you in advance for your assistance with this matter.

Very truly yours,

*Ann M. Bella*

Ann M. Bella

Enclosures

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** IES MedPlus of Kentucky, 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:

Jeffrey D. Snavely

\_\_\_\_\_  
Name of Person

Eastman & Smith Ltd.

\_\_\_\_\_  
Firm/Company

P. O. Box 10032

\_\_\_\_\_  
Address

Toledo, OH 43699-0032

\_\_\_\_\_  
City/State and Zip Code

jdsnavely@eastmansmith.com

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

For further information concerning this matter, please call:

Jeffrey D. Snavely

419

247-1662

at ( )

\_\_\_\_\_  
Name of Contact 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 3, 2015

EASTMAN & SMITH LTD.  
PO BOX 10032  
TOLEDO, OH 43699-0032

SUBJECT: IES MEDPLUS OF KENTUCKY, LLC  
Ref. Number: W15000038820

We have received your document for IES MEDPLUS OF KENTUCKY, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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) 245-6052.

Tim Burch  
Regulatory Specialist II

Letter Number: 215A00011670

**EASTMAN & SMITH LTD.**

ATTORNEYS AT LAW

*Established 1844*

**Jeffrey D. Snavely**  
**Attorney at Law**  
Direct Dial: 419-247-1662  
jdsnavely@eastmansmith.com

One SeaGate, 24<sup>th</sup> Floor  
P.O. Box 10032  
Toledo, Ohio 43699-0032  
Telephone: 419-241-6000  
Facsimile: 419-247-1777

June 10, 2015

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Re: **IES MedPlus of Kentucky, LLC**  
**Letter Number 215A00011670**  
**Reference Number W15000038820**  
Our File No: C288/021581

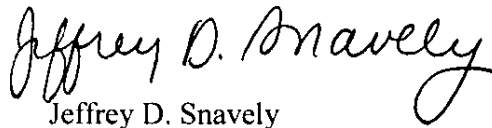
Dear Sir or Madam:

Please be advised that the voluntary dissolution of IES MedPlus of Kentucky, LLC (L15000089827) was the result of our office inadvertently filing the incorrect form with the State of Florida. We have no intention of revoking the dissolution and hereby release the name for use by another entity.

If you have any questions or concerns, please feel free to contact our office.

Very truly yours,

EASTMAN & SMITH LTD.



Jeffrey D. Snavely

JDS/amb  
Enclosures

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

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

1. IES MedPlus of Kentucky, 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. Ohio 3. 32-0388322  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 136 North Huron Street  
Toledo, OH 43604  
(Street Address of Principal Office)

6. 136 North Huron Street  
Toledo, OH 43604  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: URS Agents, LLC  
Office Address: 1540 Glenway Drive  
Tallahassee, Florida 32301  
(City) (Zip code)

**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

**URS Agents, LLC**

**Amy Purdy, Assistant Secretary**

*By: Amy Purdy*  
(Registered agent's signature)

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

Wade Kohn  
136 North Huron Street  
Toledo, Ohio 43604

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

*Wade L. Kohn*

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.)

Wade Kohn  
Typed or printed name of signee

**FILED**  
15 JUN 19 PM 4:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show IES MEDPLUS OF KENTUCKY, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2135556, was organized within the State of Ohio on September 10, 2012, is currently in FULL FORCE AND EFFECT upon the records of this office.

FILED  
JUN 19 PM 4:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 20th day of May, A.D. 2015.

*Jon Husted*

Ohio Secretary of State

Validation Number: 201514000941