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(((H15000181302 3)))



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	Division of Corporations	
	Fax Number : (850) 617-6383	
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From;	m [∞] fil	
	Account Name : BARNETT, BOLT, KIRKWOOD, LONG & KOCHE, P.A.	
	Account Number : 072731001155	
	Phone ; (813) 253-2020	
	Fax Number : (813)251-6711	

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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5 JUL 28 AM II: 10 SECRETARY OF STATE

Foreign Limited Liability Company ISCM Holdings, LLC

Certificate of Status	1
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Page Count	01
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Electronic Filing Menu

Corporate Filing Menu

Help

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Jul. 28. 2015B10:29AM Barnett, Bolt:18:07 AM PAGE 1/001 Fax No. 7562 P. 2



July 28, 2015

FLORIDA DEPARTMENT OF STATE Division of Corporations BARNETT, BOLT, KIRKWOOD, LONG & XOCHE, PA

SUBJECT: ISCM HOLDINGS, LLC REF: W15000050644

We received your electronically transmitted document. However, the 32 of document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

A certificate of existence or a certificate of good standing, dated not we more than 90 days prior to the delivery of the application to the delivery of the application to the delivery of 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 delivery 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.

Shelia H Young Regulatory Specialist II FAX Aud. #: H15000181302 Letter Number: 115A00015747 FIECENED 15 JUL 28 AM II: 10 FIELAN OF STATE ALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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 ISCM Holdings, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company;""L.L.C.," or "LLC.")

(If name unavailable, onter 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 3. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 19105 US Highway 41 North, Suite 300 5. Lutz, Florida 33549 (Street Address of Principal Office) 19105 US Highway 41 North, Suite 300 ū Lutz, Florida 33549 (Mailing Address) 7. Name and street address of Plorida registered agent: (P.O. Box NOT acceptable) Mit Desai, M.D. Name: ပာ 19105 US Highway 41 North, Suite 300 Office Address: പ്പ , Florida 33549 Lutz (City)

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.

(Registered agent's signature)

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

Mit Desai, M.D., CEO

19105 US Highway 41 North, Suite 300

Lutz, Florida 33549

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) $\frac{1}{2} = \frac{1}{2} + \frac{1}{2}$

Signature of an authorized person

This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. 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.

Mit Desai, M.D.

H15000181302

Typed or printed name of signce

Jul. 28. 2015 10:30AM Barnett, Bolt

Delaware

PAGE 1

The First State -

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ISCM HOLDINGS, 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 TWENTY-EIGHTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ISCM HOLDINGS, LLC" WAS FORMED ON THE TWENTIETH DAY OF JULY, A.D. 2015.

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

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151100019 You may verify this certificate online at corp.delaware.gov/authver.shtml

Jelfrey W. Bollock, Secretary of State AUTHENTICATION: 2593762

DATE: 07-28-15