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Foreign Limited Liability Company HEADREHAB, LLC

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EXAMINER

Headrehab Inc. Wit

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Headychab track

1 of 2

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

COMPANY TO TRANSACT BI	THEN GOODILY POTALIA STATUTES, THE POSTONANCE IS SUBMITTED TO REGISTE USINESS IN THE STATE OF FLORIDA:	KA POREIGN LIMITED LIABILITY
HEADREHAB, LLC	eign Limited Liability Company; must include "Limited Liability Company," "LY.C.	* or */LLC.**)
	·	
lability Company," "L.L.C,	ficensite name adopted for the purpose of transacting business in Florida. The alternate " or "LLC.")	pamo must include 'Limited
Delaware	35-2284954	
	of which foreign limited liability (PRI number, if applied	able)
·		
-	(Date first transacted business in Florids, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
2170 Main Street, St	ulte 103, Sarasota, Florida 34237	
0470.14.15	(Street Address of Principal Office)	
2170 Main Street, Su	lite 103, Sarasota, Florida 34237	ZOIS AUG-5
	(Melling Address)	— SSA 5
St		.严异 星
Name and street addres	a of Florida registered agent; (P.O. Box NOT acceptable)	To: 💆
Name:	Vera Anderson	别 3
Office Address:	2170 Main Street, Suite 103	
	Sarasota , Florida 34237	
is application, I hereby	gistered agent and to accept service of process for the above stated corporate accept the appointment as registered agent and agree to act in this capacity, statutes relative to the proper and complete performance of my duties, and it tion as registered agent.	. I further agree to comply
	(Registered agent's signature)	
. The name, title or cape	city and address of the person(s) who has/have authority to manage is/are:	
	er, 2170 Main Street, Suite 103, Sarasota, Florida 34237	
relg Anderson, Manag	or, 2170 Main Street, Suite 103, Sarasota, Florida 34237	
Attached is a certificate risdiction under the law of the translator must be su	of existence, no more than 90 days old, duly authenticated by the official having which it is organized. (If the certificate is in a foreign language, a translation budged)	ing custody of records in the n of the certificate under oath
•	Signature of an authorized person	
accordance with section facts stated herein are to gree felony as provided i	t-605,0203, P.S., the execution of this document constitutes an affirmation un- rue. I am aware that any false information submitted in a document to the Dep for in s.817.155, P.S.)	der the penalties of perjury that extment of State constitutes a third
	Vera Anderson	
	Typed or printed name of signes	

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "HEADREHAB, 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 FIFTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEADREHAB, LLC" WAS FORMED ON THE FIRST DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2015 AUG -5 AM ID: 31

5579559 8300

151137902

DATE: 08-05-15

You may verify this certificate online

AUTHENTY CATION: 2619255