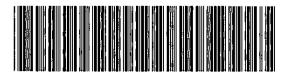
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SECRETARY OF STATE

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COVER LETTER

, Registration Section Division of Corporations

TO:

SUBJECT:	AFL	G I		tments -		r Care,	LLC
			Liability Comp	pany for Authorization enced foreign limited li	to Transact Busin		
Please return all co	orrespondence	concerning this	matter to the	following:			
		Fre	e ddy	Russi	αν		
-			N (N	ame of Person			
	AF	LG -	Inves	Russiane of Person Stments	- Heal	fcare,	LLC
-			Fi	irm/Company			
-	403	o W.	Boy S	Scout Bh	vd., Su	ite 135	5
•				33607			
_	mavia	\alpha \left\ \delta \reft\ \text{E-mail addre}	eza	tate and Zip Code Of Ig INVE d for future annual repo	ort notification)	ts.com	\sim
For further informa	ntion concernir	ng this matter, p	lease call:				
Fr	eddy Name	Pusse of Contact Person	sian on	_at (<u>\$13</u>)_ Area Code	Daytime Teleph	hone Number	
Division of Registration P.O. Box	G ADDRESS of Corporation on Section 6327 ee, FL 32314			Div Reg Clif 266	REET ADDRES vision of Corporate gistration Section fton Building of Executive Cent lahassee, FL 3230	tions ter Circle	
Enclosed is a check		ving amount: X \$130.00 F Certificate o		☐ \$155.00 Filing Fe		00 Filing Fee, Ce & Certified Cop	

,...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 FORE COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	IGN LIMITED LIABILITY
AFLG Investments- Health case,	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 mus	st include "Limited
Liability Company," "L.L.C." or "L.L.C.")	
2. Delawase 3. 47-470502 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized) N/A	
(Date first transacted business in Florida, if prior to registration.)	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5.	O #*
4030 W. Boy Scout BIVD. Suite 1	65
6. Tampa FL 33607	
6. PD 95401.	
(Mailing Address)	
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	
Name: reddy pussiam	
Name: Freddy Russiam Office Address: 40'30 W. Boy Scout Blvd. She 135	PH IZ:
Office Address: 4030 W. Boy Scout Blvg. Sate 133 Tam pa: (City), Florida 33607 (Zip code)	STA 2:
(City) (Zip code) Registered agent's acceptance:	部 3
Having been named as registered agent and to accept service of process for the above stated corporation at the	e place designated in
this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further with the provisions of all statutes relative to the proper and complete performance of the proper and I am fam.	er agree to comply iliar 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:	
Freddy Russian President & CEO	
4030 W. Boy Scout Blvd., & Suite 135	
Tampa 'FL' 33007	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custom	dy 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 c	
of the translator must be submitted)	
Signature of an authorized person	
	information
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155,	F.S.

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "AFLG INVESTMENTS-HEALTHCARE, 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 "AFLG
INVESTMENTS-HEALTHCARE, LLC" WAS FORMED ON THE FOURTH DAY OF
AUGUST, A.D. 2015.

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

5796818 8300

151128324

AUTHENTY CATION: 2620382

DATE: 08-05-15

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