

M15000007796

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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2015 SEP 25 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SEP 30 2015  
J. HARRIS

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** INSIGHT MEDICAL RESOURCES, 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:

PHILIP HUBER

Name of Person

INSIGHT MEDICAL RESOURCES, LLC

Firm/Company

9910 NW 13TH CT

Address

PEMBROKE PINES, FL. 33024

City/State and Zip Code

PHUBER@INMEDRESOURCES.COM

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

For further information concerning this matter, please call:

PHILIP HUBER

954 290-2839  
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

September 10, 2015

PHILIP HUBER  
9910 NW 13TH CT  
PEMBROKE PINES, FL 33024

SUBJECT: INSIGHT MEDICAL RESOURCES, LLC  
Ref. Number: W15000050076

FILED  
2015 SEP 25 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

We have received your document for INSIGHT MEDICAL RESOURCES, LLC and your check(s) totaling \$160.00. 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 because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

The document number of the name conflict is P14000046693.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 115A00019090

850-245-6950

RECEIVED  
15 SEP 25 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 24, 2015

PHILIP HUBER  
9910 NW 13TH CT  
PEMBROKE PINES, FL 33024

SUBJECT: INSIGHT MEDICAL RESOURCES, LLC  
Ref. Number: W15000050076

FILED  
2015 SEP 25 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

We have received your document for INSIGHT MEDICAL RESOURCES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by 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 attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P14000046693.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 415A00015626

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2015 SEP 25 PM 1:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



September 21, 2015

Jenna D Harris

Regulatory Specialist II

Dear Jenna,

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2015 SEP 25 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The name that is in conflict, document number P14000046693 (Insight Medical Resources Inc.) and document number W15000050076 (Insight Medical Resources LLC.) are indeed the same "Principles". Philip J Huber is the Principle owner of both entities. Effective August 11, 2015 P14000046693, (Insight Medical Resources Inc.), has been dissolved and there is no intention of reactivating it.

Also attached are the Articles; however they were already sent once before so you should already have them on file.

Sincerely,

A handwritten signature in black ink, appearing to read "Philip J Huber", with a stylized flourish at the end.

Philip J Huber

President

**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. INSIGHT MEDICAL RESOURCES, 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 3. 47-3532890  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 4/1/2015  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. \_\_\_\_\_  
9910 NW 13TH CT, PEMBROKE PINES FL 33024  
(Street Address of Principal Office)

6. 9910 NW 13TH CT, PEMBROKE PINES FL 33024  
\_\_\_\_\_  
(Mailing Address)

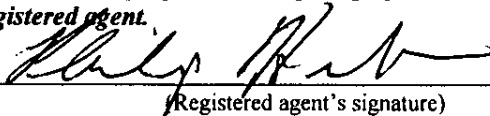
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Philip J Huber

Office Address: 9910 NW 13th CT  
PEMBROKE PINES, Florida 33024  
(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.*

  
(Registered agent's signature)

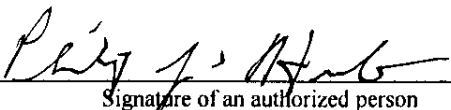
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

PHILIP J HUBER

PRESIDENT

9910 NW 13TH CT, PEMBROKE PINES, FL 33024

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)

  
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.

PHILIP J HUBER

Typed or printed name of signee

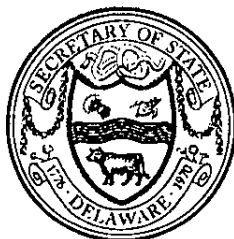
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2016 SEP 25 PM 12:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# Delaware

PAGE 1

*The First State*


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INSIGHT MEDICAL RESOURCES 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 FOURTEENTH DAY OF AUGUST, A.D. 2015.



5716221 8300

151160786

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2646772

DATE: 08-14-15