

# M15000007815

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : INCORPORATING SERVICES FL  
Account Number : I20050000052  
Phone : (850)656-7956  
Fax Number : (850)656-7953

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

**Email Address:** russburks@ansleycapital.com

**Foreign Limited Liability Company  
Employers Health Network Holdings, LLC**

Certificate of Status	0
Certified Copy	1
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K. SALY  
EXAMINER  
OCT -1 2015

**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. Employers Health Network Holdings, 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. 61-1766825  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 48 Seagrass Lane  
Isle of Palms, SC 29451  
(Street Address of Principal Office)

6. 48 Seagrass Lane  
Isle of Palms, SC 29451  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: Incorporating Services, Ltd.  
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 limited liability company 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.*

Kimberly L. Sharpe Kimberly L. Sharpe, Asst. Secretary  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  
Russell D. Burks, 48 Seagrass Lane, Isle of Palms, SC 29451, Manager  
Orlo L. Dietrich, Jr., 48 Seagrass Lane, Isle of Palms, SC 29451, Manager  
Karen Streets, 48 Seagrass Lane, Isle of Palms, SC 29451, Manager

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)

Russell D. Burks  
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.

Russell D. Burks, Manager  
Typed or printed name of signer

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**Attachment to Application By A Foreign Limited Liability Company for Authorization to  
Transact Business in Florida  
For  
Employers Health Network Holdings, LLC**

**8. Continuation:**

- c. Chuck Kramer, Manager  
48 Seagrass Lane, Isle of Palms, SC 29451
- d. Dick DeLater, Manager  
48 Seagrass Lane, Isle of Palms, SC 29451

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# Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMPLOYERS HEALTH NETWORK 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 TENTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EMPLOYERS HEALTH NETWORK HOLDINGS, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JULY, A.D. 2015.

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

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*YMSER*

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