M1500009168				
(Requestor's Name) (Address)	300278101493			
(Address) (City/State/Zip/Phone #)	10/16/1501006010 **125.00			
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	ALLANASSEE FLORIDA			
Office Use Only	NOV 16 2015 J. HARRIS			

COVER LETTER

TO: Registration Section Division of Corporations

,

.

SUBJECT: _____

~ 1

...

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:

Kristyn Dow					
<u></u>	N	ame of Person			
HealthRight Ll	LC				
	F	irm/Company			
11515 66th Str	eet N				
4++++++++++++++++++++++++++++++++		Address			
Largo, FL 337	73				
	City/S	tate and Zip Code	······································		
kdow@healthrig					
	E-mail address: (to be use	d for future annual report	notification)		
For further information concernir	ng this matter, please call:				
Kristyn Dow		_ at ()	4942		
Name	of Contact Person	Area Code I	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 follow \$125.00 Filing Fee	ving amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee δ Certified Copy	2 \$160.00 Filing Fee, Certificate of Status & Certified Copy		
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15 NOV 12 PM 12: 24

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE Division of Corporations

October 19, 2015

KRISTYN DOW 11515 66TH STREET N LARGO, FL 33773

SUBJECT: HEALTHRIGHT LLC Ref. Number: W15000069238

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We have received your document for HEALTHRIGHT LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following: $\overline{\odot}_{\overline{\Box}}$

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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: 915A00022067

Certificate of Good Standing Enclosed. 11/10/15 Knstyn Dow 727-951-9942 Co) Kdowebug Htnight.com

www.sunbiz.org

Division of Corporations - 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. HealthRight LLC

Delaware Jurisdiction under the law of wh		47-4623887				
Jurisdiction under the law of wh	A TO A CONTRACT OF A DATA	, <u></u>	(FEI number, if applicable)			
company is organized)	ich foreiga fimilea fiaoffity		(rui number, if applicable)			
July 13, 2015						
, , , , , , , , , , , , , , , , , , ,	(Date first transacted business in I (See sections 605.0904 & 605.0905.	forida if prior to re- F.S. to determine p-	gistration.) enalty liability)			
11515 66th Street N		·	ويستجربها الأفادانية بالتنا والمستجر ويتوارك والتحاد المراجع والمراجع			
Largo, FL 33773						
	(Street Address of Princip	pal Office)				
11515 66th Street N					2015	
Largo, FL 33773						Ę
	(Mailing Addre.	38)		Ξ.	ЧOЧ	4177 112.1
Name and street address of I	Aorida registered agent: (P.O. Bo			S	N	6700007 8
	Edward McGinty				PH	
Office Address: 101	E Kennedy Blvd				ů	are 3,3,4] }
Tan	npa	······································	Florida 33602	Ę.	03	
	(City)	······································	(Zip code)			
gistered agent's acceptance		r	2			
signated in this application,	red agent and to accept service of I hereby accept the appointment	f process for the a as revistered aver	bove stated innited liability nt and avree to act in this (y company capacity	e at the j Efurthe	place r ayrei
		<u> </u>	erformance of my dutics, a			

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

Scott Roix, Chairman

Howard Seidman, Chief Operating Officer

Kristyn Dow, Controller

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)

lard Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 1 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. $\Re(0 H - G, R_0)$

Typed or printed name of signee



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHRIGHT 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 SEVENTH DAY OF NOVEMBER, A.D. 2015.



of State

Authentication: 10383023

Date: 11-07-15

Page 1

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SR# 20150718056 You may verify this certificate online at corp.delaware.gov/authver.shtml