

M15000009413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

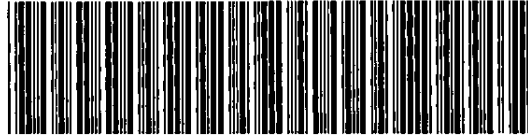
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200279313592

11/20/15--01021--018 \*\*130.00

FILED  
2015 NOV 20 AM 11:06  
STATE DEPT OF STA  
TALLAHASSEE FLORIDA

NOV 23 2015  
J. HARRIS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: QDS Toxicology 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:

Kirsten Wallace  
Name of Person

QDS Toxicology LLC  
Firm/Company

6711 Melrose Ave. Los Angeles Ca 90038  
Address

Los Angeles Ca 90038  
City/State and Zip Code

Kirsten@communityrecoveryla.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gabe Meyers at ( 818 ) 633-4754  
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

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. QDS Toxicology 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. Los Angeles, California  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-3445476  
(FEI number, if applicable)

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

5. 6711 Melrose Ave. Los Angeles Ca 90038

(Street Address of Principal Office)

6. 6711 Melrose Ave. Los Angeles Ca 90038

(Mailing Address)

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

Name: Scott Willard

Office Address: 6831 NW 20th Ave. Suite 105

Fort Lauderdale, Florida 33309  
(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.

Scott Willard  
(Registered agent's signature)

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

Kirsten Wallace - CEO ; 388001 West 6711 Melrose Ave Los Angeles Ca 90038  
Chris Bathum - Manager ; 6711 Melrose Ave Los Angeles Ca 90038  
Gabe Meyers - Director ; 6711 Melrose Ave. Los Angeles Ca 90038

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)

KWallace

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.

Kirsten Wallace

Typed or printed name of signee

2015 NOV 20 AM 11:06  
FILED  
DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:** QDS TOXICOLOGY, LLC

**FILE NUMBER:** 201507310063  
**FORMATION DATE:** 03/11/2015  
**TYPE:** DOMESTIC LIMITED LIABILITY COMPANY  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of November 17, 2015.

**ALEX PADILLA**  
Secretary of State