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DERUCE O. BRUCE



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2015

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: HSC ASSOCIATES, LLC

Ref. Number: W15000080372

We have received your document for HSC ASSOCIATES, LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 6 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 015A00026144

FILED



Division of Corporations - P.O. ROX 6327 -Tallahassee, Florida 32314

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

12/4/15

NAME:

HSC ASSOCIATES, LLC

TYPE OF FILING: APPLICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: HSC Associates, LLC				
Name of Limited Liabili	ty Company			
The enclosed "Application by Foreign Limited Liability Company for Author Existence, and check are submitted to register the above referenced foreign li	rization to Transact Business in F mited liability company to transa	lorida," Certificate of act business in Florida		
Please return all correspondence concerning this matter to the following:				
Name of Person				
206 E. 9th Street, St	e. 1300			
Firm/Company				
Capitol Services - Corporat	e Filings Team			
Address Austin TX 787	01	2015 DE		
City/State and Zip Code				
spyladie@aol.com				
E-mail address: (to be used for future and For further information concerning this matter, please call:	und report notification)	EC IN A 8:		
Tot talker internation concerning and matter, presse can.	€ 4:	Sim G		
at (800	345-4647			
Name of Contact Person Area Co	ode Daytime Telephone Nu	ımber		
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 Circl Tallahassee, FL 32301	le		
Enclosed is a check for the following amount: \$\Begin{align*} \begin{align*} \text{\$125.00 Filing Fee} & \Begin{align*} \text{\$\$130.00 Filing Fee} & \Begin{align*} \text{\$\$Certificate of Status} & \text{\$\$Certified Collections.} \end{align*}		g Fee, Certificate ified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 805.0902, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

COMPANY TO TRANSACT BU	SINESS IN THE STATE OF	THARIA.					
1. HSC Associates, (Name of Force	LLC ign Limited Liability Con	npany; must inclu	de "Limited Lia	bility Company," "L.L.C.," or	"LLC.")		
(If name unavailable, enter alt Liability Company," "L.L.C,"	ernale name adopted for or "LLC.")	the purpose of tra	nsacting busines	is in Florida. The alternate nar	ne must includ	e "Limitée	1
2. Texas (Jurisdiction under the law company is organized)	of which foreign limited l	liability 3.	47-49770	63 (FEI number, if applicable)		
4	(Date first transa (See sections 605.0)	cted business in F	iorida, if prior to P.S. to determin	o registration.)			
5. 2015 Glenmere							
Allen, Texas 750	113 (Street A	Address of Princip	al Office)		- 5 23	28 15	
6. 2015 Glenmere	Drive				_ ∑ 2		
Allen, Texas 750)13	(Malling Addres	2)		HASS	DEC 14	T
7. Name and street addres	e of Florida registered	· · · ·	•	tahle)	m m		T
	Joy Carr	again: (r.o. no	x MOT sereb	table)	1000 1000	>	C
Name:					er Er		
Office Address:	937 Brydie Cou				9 rn	0	
	Casselberry	(City)		_, Florida <u>32707</u> (Zip code)			
Registored agent's accep Having been named as re- designated in this applica- to complywith the provisi- uccept the obligations of t	gistered agept and to d tion, I hereby accept th ons of all statutes celai	accept service of he appointment five to the prope red agent,	as registered i r und complet	igent and agree to act in the performance of my dutle	his capacity.	I further	agree
		(Registered a	gent's signaturo				
8. The name, title or capa							
				ry, Florida 32707			
James P. Carr	Manager; 937 Br	ydie Court,	Casselber	ry, Florida 32707	_		
	of which it is organized	d. (If the certific	ate is in a fore	cated by the official having ign language, a translation			
Mest and acceptance of the second	17 /a . 21	Signature of an			C. l Y E	matte à	
		ate constitutes a	third degree fo	Statutes. I am aware that a lony as provided for in s.81		nauon	
		Joy 1	L. Carr				

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

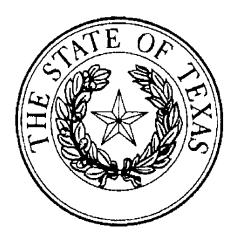
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for HSC Associates, LLC (file number 802281772), a Domestic Limited Liability Company (LLC), was filed in this office on August 27, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 11, 2015.



Carlos H. Cascos Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 644627050002