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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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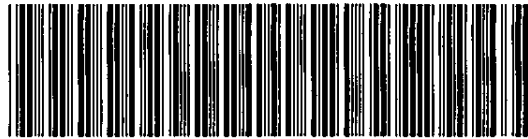
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

FEB 09 2016

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Iris Telehealth 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:

Tarik Shaheen, M.D.

Name of Person

Iris Telehealth, LLC

Firm/Company

1944 East Pembroke Ave, Suite A

Address

Hampton, VA 23663

City/State and Zip Code

tarik.shaheen@iristelehealth.com

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

For further information concerning this matter, please call:

Tarik Shaheen

888

285-2269

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


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. Iris Telehealth, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Iris Telehealth1, 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. Virginia
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 47-1062467
(FEI number, if applicable)
4. January 11, 2016
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1944 East Pembroke Ave Suite A
Hampton, VA 23663
(Street Address of Principal Office)
6. 1944 East Pembroke Ave Suite A
Hampton, VA 23663
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Adam Hemmen
Office Address: 16208 Sawgrass Cir
Tampa, Florida 33624
(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.

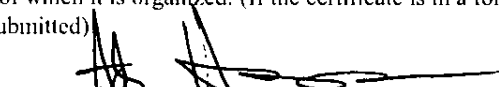

(Registered agent's signature)

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

Tarik Shaheen, CEO, 1944 East Pembroke Ave, Suite A Hampton, VA 23663

Adam Hemmen, VP of Operations, 16208 Sawgrass Cir. Tampa, FL 33624

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.

Adam Hemmen

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

That Iris Telehealth LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is May 27, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
February 5, 2016*

Joel H. Peck
Joel H. Peck, Clerk of the Commission