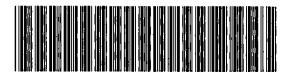
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	Registration Section Division of Corporation	; 1 S			
SUBJEC	Jackson Executives,	LLC			
SUBJEC	1.	Name of l	Limited Liability C	Company	
					nsact Business in Florida," Certificate of company to transact business in Florida.
Please ret	um all correspondence o	concerning this matter to the	following:		
	Tiphanie McAf	`ee			
	-	N	ame of Person		
	Jackson Execu	tives, LLC			
		Fi	irm/Company	·	
	2655 Northwin	ds Parkway			
			Address	<u></u>	
	Alpharetta, GA	30009			
	 	City/S	tate and Zip Code		
	tmcafec@jackso	nhealthcare.com			
		E-mail address: (to be used	d for future annual	report not	ification)
For furthe	er information concernin	g this matter, please call:			
Tiphanic McAfee		678 at (992-12	69	
-	Name o	of Contact Person	Area Code	Day	time Telephone Number
]	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301
	is a check for the follow \$125.00 Filing Fee	ring amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ıg Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

10 m

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:

Liability Company," "L.L.C,"	ernate name adopted for the purpose of transacting busin	ness in Florida. The alternate	name must i	nclude '	*Limited
2. Georgia	3. 30-0858459	9			
	of which foreign limited liability	(FEI number, if applica	ole)		
4. April 4, 2016					
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to determ	to registration.)			
5. 2655 Northwinds Parky	•				
Alpharetta, GA 30009					
- rupharous, or roots	(Street Address of Principal Office)	<u> </u>			
6. 2655 Northwinds Parkw	ay				
Alpharetta, GA 30009			7 <u>2</u> 55	5	
	(Mailing Address)				
7. Name and street address	of Florida registered agent: (P.O. Box NOT acce	eptable)		<	الاعدى مار 1940م مى
Name:	Corporation Service Company		역의 기계	ന	
Office Address:	1201 Hays Street		ري در اتر در اتر	:21143	
Office Address.	Tallahassee	32301	물목	ယ	7444
	(City)	, Florida 32301 (Zip code)	— Ş	2	
	ance:				
	istered agent and to accept service of process for a	the above stated limited li	ability com	<i></i>	it the plac
Having been named as reg designated in this applicati to complywith the provisio	istered agent and to accept service of process for ion, I hereby accept the appointment as registered as of all statutes relative to the proper and complety position as registered agent. Registered agent's signature	l agent and agree to act in ete performance of my du Linda Assista	this capac ties, and I d Snook	ity. I f	urther ag
Having been named as reg designated in this applicate to complywith the provisio accept the obligations of n	ion, I hereby accept the appointment as registered as of all statutes relative to the proper and complety position as registered agent.	l agent and agree to act in ete performance of my due Linda SASSISTA	this capac ties, and I d Snook	ity. I f	urther ag
Having been named as reg designated in this applicate to complywith the provisio accept the obligations of n 8. The name, title or capac	ion, I hereby accept the appointment as registered as of all statutes relative to the proper and complety position as registered agent. Registered agent's signature	l agent and agree to act in ete performance of my due Linda SASSISTA	this capac ties, and I d Snook	ity. I f	urther ag
designated in this applicate to complywith the provisio accept the obligations of n 8. The name, title or capac	ion, I hereby accept the appointment as registered as of all statutes relative to the proper and completely position as registered agent. Registered agent's signature and address of the person(s) who has/have authorized.	l agent and agree to act in ete performance of my due Linda SASSISTA	this capac ties, and I d Snook	ity. I f	urther ag
Having been named as reg designated in this applicate to complywith the provisio accept the obligations of n 8. The name, title or capac	ion, I hereby accept the appointment as registered as of all statutes relative to the proper and completely position as registered agent. Registered agent's signature and address of the person(s) who has/have authorized.	l agent and agree to act in ete performance of my due Linda SASSISTA	this capac ties, and I d Snook	ity. I f	urther ag

Typed or printed name of signee

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.

Douglas B. Kline

Control Number: 15017499

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Jackson Executives, LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date

Jurisdiction : Georgia
Print Date : 05/20/2016
Form Number : 211

:13178724

: 02/12/2015



Brian P. Kemp Secretary of State