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Data: 00/02/2016	Account #: I2000000088
Date: 09/23/2016	Account #. 120000000088
Name: Michelle Walker	
Reference #: T005344	
ENTITY NAME: SAGIS PLLC, LLC	
Articles of Incorporation/Authorization to Transact Busines	s
Amendment	
Annual Report	0001104
Change of Agent A Please Wain or	iginal file date *
Reinstatement	
Conversion	
Merger	
Dissolution/Withdrawal	
Fictitious Name	
Other: CERTIFIED COPY UPON FILING	
Authorized Amount: 4155	
Authorized Amount: \$155 Signature: Michelle Walker	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 20, 2016

NATIONAL CORPORATE RESEARCH MICHELLE WALKER

SUBJECT: SAGIS, PLLC Ref. Number: W16000061042

We have received your document for SAGIS, PLLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Acceptable suffix included after PLLC.,

Please return your document, along with 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: 416A00018768



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 7, 2016

NATIONAL CORPORATE RESEARCH MICHELLE WALKER

SUBJECT: SAGIS, PLLC Ref. Number: W16000061042

We have received your document for SAGIS, PLLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the recognition of a foreign professional limited liability company. An accepatable limited liability company suffix will need to be added to your entity name for this Department to accept and file your document.

Acceptable suffix included after PLLC.,

Please return your document, along with 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: 416A00018768

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

IN COMPLIANCE WITH SECT.	ION 605.0902, FLORID SINESS IN 11 IE STATE (A STATUTES, T OF FLORIDA:	TIE FOLLOHTNG IS	SUBMITTED TO) REGISTER A FOI	REIGN LIMITI	ED LLABI	ינדעזי
1.		LLC, LLC				-		
(Name of Forei	gn Limited Liability C	ompany; must	include "Limited Lia	shility Company.	," "L.,L.,C.," or "L.I	.C.")		
(If name unavailable, enter alt	ernate name adopted for "LLC.")	or the purpose o	of transacting busine	ss in Florida. Th	e alternate name n	nust include "	Limited	
	xas		3		r, if applicable)			
(Jurisdiction under the law of company is organized)	f which foreign limite	d liability		(FE) number	r, (i applicanic)			
4.			n with the State					
	(Date first tran (See sections 605	sacted business .0904 & 605.09	in Florida, if prior to 905, F.S. to determin	o registration.) 1e penalty liabili	ту}	•		
5	522	5 Katy Fwy, Sc	ıita 498					
	H	louston, TX 77	'007					
	(Stree	t Address of Pr	incipal Office)			7700	:a	
6	5225	Katy Fwy, Su	ite 496			F- 775	(C)	٠٠٠،
	L.	louston, TX 77	²007			المارية المارية المارية	<u>m</u>	ĒΫ́
		(Mailing Ac				225	9	\bigcirc
7. Name and street address	of Florida registere	d agent: (P.O	. Box NOT accep	otable)		स्त <u>्र</u>	A	
Name:	National Corp	orate Rese	arch, Ltd., Inc.			32	င္ပဲ	\mathbb{B}
Office Address:	115 North	Calhoun Str	eet, Suite 4	<u> </u>		祭召	0.1	
	· ·	Tallahassee)	, Florida	32301			
		(City)		_ , , , , , , , , ,	(Zip code)			
Registered agent's accept Having been named as reg designated in this applicate to complywith the provisio accept the obligations of m	istered agent and to ion, I hereby accept ns of all statutes rel	the appointmative to the piered agent. Wex	ent as registered i	agent and agree te performance	ee to act in this c	apacity. I fi	irther a	gree
8. The name, title or capac	city and address of t	he person(s) v	vho has/have autho	ority to manage	is/arc:			
How	ard Martin, MD, Memi	ber, 5225 Katy	Fwy, Suite 496, Ho	uston, TX 7700	7			
John	Cangeosi, MD, Memi	ber, 5225 Katy	Fwy, Suite 496, Ho	ouston, TX 7700	7	<u>. </u>		
		<u>-</u>						
9. Attached is a certificate of jurisdiction under the law of the translator must be su	of which it is organiz brnitted)		tificate is in a fore					
This document is executed submitted in a document to		late constitute	es a third degree fe	lony as provide			on	
			i Martin, MD, Memb inted name of signee					
		- >1 141	··· 1 10 16 11 47	-				

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



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 Sagis, PLLC (file number 801441419), a Domestic Limited Liability Company (LLC), was filed in this office on June 17, 2011.

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 September 01, 2016.



Carlos H. Cascos Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 687773020003