

m16000008994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

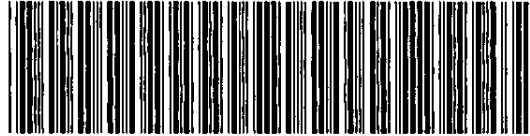
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Fees \$638.75 W16-SV933

Office Use Only



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08/15/16--01035--011 **125.00

FILED
16 NOV -1 P 4: 39
CLERK OF STATE
TALLAHASSEE, FLORIDA

S Warren

NOV 09 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2016

WINSTON PORTER
4488 NORTH SHALLOWFORD ROAD, SUITE 103
DUNWOODY, GA 30338

SUBJECT: OCALA HEALTHCARE HOLDINGS LLC
Ref. Number: W16000056933

We have received your document for OCALA HEALTHCARE HOLDINGS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$638.75.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 116A00017345

OCALA HEALTHCARE HOLDINGS, LLC

4488 NORTH SHALLOWFORD ROAD

SUITE #103

DUNWOODY, GA 30338

TEL 770-399-9988

NOVEMBER 1, 2016

Attention: Stacey

RECEIVED
2016 NOV -8 AM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Stacey,

I am returning to a corrected version of our Application for Foreign Limited Liability Company authorization. When we first completed the application, we erroneously provided as the "Date first transacted business in Florida" as the original date the entity was established. In retrospect, the confusion arose because the entity in question has not yet begun transacting business in Florida and therefore the original date of establishment was provided.

Please accept the attached replacement as a true and correct submission. Please accept our apologies for the confusion in this matter. If you need anything else, please let us know.

Warmest Regards,



Winston Porter

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2016 NOV -7 P 4:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ocala Healthcare Holdings 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:

Winston Porter

Name of Person

Ocala Healthcare Holdings LLC

Firm/Company

4488 North Shallowford Road, Suite 103

Address

Dunwoody, GA, 30338

City/State and Zip Code

~~EllinMcCabe@msn.com~~

ellin_mccabe@msn.com

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

For further information concerning this matter, please call:

Ellin McCabe

770

399-9988

Name of Contact Person

at ()

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. Ocala Healthcare Holdings 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. Georgia, USA 3. 47-3103339
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)

4. Estimated Start Date Jan 1 2017
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4488 North Shallowford Road, Suite 103, Dunwoody, GA, 30338
(Street Address of Principal Office)

6. 4488 North Shallowford Road, Suite 103, Dunwoody, GA, 30338
(Mailing Address)

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

Name: Donna Marko

Office Address: 9848 SW 110th Street

Ocala, Florida 34481
(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.

Donna Marko
(Registered agent's signature)

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

Winston A. Porter, CEO - 4488 North Shallowford Road, Suite 103, Dunwoody, GA, 30338

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)

Winston A. Porter
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.

Winston A. Porter

Typed or printed name of signee

FILED
NOV - 1 P 4 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Ocala Healthcare Holdings 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	: 13557431
Date Inc/Auth/Filed	: 02/05/2015
Jurisdiction	: Georgia
Print Date	: 11/03/2016
Form Number	: 211



Brian P. Kemp
Secretary of State