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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

\_\_\_\_\_  
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**PAKIS, GIOTES, PAGE & BURLESON**

A PROFESSIONAL CORPORATION

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December 8, 2016

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WILLIAM R. PAKIS  
OF COUNSEL

Florida Secretary of State  
Division of Corporations, Registration Section  
Post Office Box 6327  
Tallahassee, Florida 32314

**RE: *Pembroke Pines FL Homecare, LLC***

Dear Madam or Sir:

Enclosed is one Application for Authorization to Transact Business in Florida for Pembroke Pines FL Homecare, LLC accompanied by the required Cover Letter and Certificate of Existence.

Also enclosed is our check for \$125.00 for filing fees.

Please return proof of filing to my attention as indicated on the Cover Letter form. Thank you for your help with this request.

Yours sincerely,

**PAKIS, GIOTES, PAGE & BURLESON, P.C.**



Kristy Higginbotham  
Legal Assistant

Kh

*Enclosures*

16 DEC 18 PM 3:28  
TALLAHASSEE, FL  
STATE SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
REGISTRATION SECTION

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PEMBROKE PINES FL HOMECARE, 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:

KRISTY HIGGINBOTHAM  
Name of Person

PAKIS, GOTES, PAGE & BURLESON, P.C.  
Firm/Company

POST OFFICE BOX 58  
Address

WACO, TEXAS 76703-0058  
City/State and Zip Code

kmh@pakislaw.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE  
12/15/12

For further information concerning this matter, please call:

KRISTY HIGGINBOTHAM at ( 254 ) 297-7300  
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. PEMBROKE PINES FL HOMECARE, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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. TEXAS 3. 81-4069320  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. December 5, 2016  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 815 LAKE AIR DRIVE  
WACO, TEXAS 76710  
(Street Address of Principal Office)

6. 815 LAKE AIR DRIVE  
WACO, TEXAS 76710  
(Mailing Address)

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

Name: CORPORATION SERVICE COMPANY  
Office Address: 1201 HAYS STREET  
TALLAHASSEE, Florida 32301  
(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.

Chelsey Martine  
Asst Vice President  
(Registered agent's signature)

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

MICHAEL T. HILLMAN, PRESIDENT, 815 LAKE AIR DRIVE, WACO, TX 76710  
BRENT M. WILSON, VICE-PRESIDENT, 815 LAKE AIR DRIVE, WACO, TX 76710  
BENTIE POLNICK, VICE-PRESIDENT, 815 LAKE AIR DRIVE, WACO, TX 76710

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]  
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.

MICHAEL T. HILLMAN, President  
Typed or printed name of signee

16 DEC 12 PM 3:28  
TALLAHASSEE  
SECRETARY OF STATE

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 PEMBROKE PINES FL HOMECARE, LLC (file number 802557008), a Domestic Limited Liability Company (LLC), was filed in this office on October 06, 2016.

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

16 DEC 12 PM 3:28  
SECRETARY OF STATE  
FALL AMASSER, C. O. 0610

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 November 29, 2016.



A handwritten signature in black ink, appearing to read "Cascos", followed by a horizontal line.

Carlos H. Cascos  
Secretary of State

Come visit us on the internet at <http://www.sos.state.tx.us/>

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Prepared by: SOS-WEB

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TID: 10264

Dial: 7-1-1 for Relay Services  
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