Division of Corporations



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company PHI LIFE SCIENCES, LLC

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COVER LETTER

TO:

Registration Section Division of Corporations

PHI LIFE SCIENCES, LLC

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.

Name of Limited Liability Company

Please return all correspondence co	oncerning this matter to the following:	
	Cheyenne Moseley	
	Name of Porson .	
	Legalzoom.com, Inc.	
	Firm/Company	
	101 N Brand Blvd 11th Floor	
	Address	
	Glendale, CA 91203	
 	City/State and Zip Code	•
sawan@philif	resciences.com	2
For further information concerning	E-mail address: (to be used for future annual report notification) Him this matter, please call:	
Cheyenne Moseley	at ()	- m
Name of	Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FI. 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the fo □ \$125.00 Filing Feo	ollowing amount: ☐ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate of Status	

œ.

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:

PRI LIPE SCIENCES, I	TC			
(Name of Fore	gn Limited Lisbillity Company; m	ost Include "Limited Li	ishility Company," "L.L.C.," or "I	LIC:')
Liability Company," "L.I.C."	emate name adopted for the purpo or "LLC,")	se of transacting busin	ess in Flurida. The alternate name	must include "Limited
2. South Carolina		3.		
(Jurisdiction under the law s company is organized)	of which foreign limited liability		(YEI number, if applicable)	
4.	(Date lirs) francacted busin	see in Florida if minr	to reminifulion	
•	(See sections 605.0904 & 60.	5.0905, F.S. 10 determi	ine pausity liability)	
5. 645 Meeting St., Suite	3			
Charleston, South Caro				
CAS Manualina Co. Cultur C	•	Principal Office)		
6. 645 Meeting St., Sulte 3	· · · · · · · · · · · · · · · · · · ·			
Charleston, South Caro	lina 29403			
*	(Mailing	Address)		جم الج
7. Name and street address	g of Florida registered agent: ()	P.O. Box <u>NOT</u> acce	piable)	
Name:	United States Corporation Ag	jents, Inc.		至高 🚖
OCC A 12	13302 Winding Oak Court Su	ite A		202
Office Address:			33610	SESS -
	Tampa		Florida 33612	rie n
Registered agent's accept	(* *,		(Zip 60di)	ELS
designated in this applicate to complywith the provision	gistered agent and to accept se tion, I hereby accept the appoli ms of all statutes relative to the my position as registered agent	ntment as registered e proper and comple Chayanna Mo	f agent and agree to act in this	capacity. Thirther agree
	(Regi	stered agent's signatur	6)	
8. The name, title or capa	city and address of the person(s) who has/have suth	ority to manage is/are;	
Sawan Hurst, Member, 2	Marsh Island Lane, Isle of Pa	lms, SC 29451	·	
Robert Barfield, Member	, 106 Regency Place, Columb	nia, SC 29212		
Dorothy Fitzsimmons, Mo	ember, 1140 Indian Summer P	oint, Chapin, SC 29	036	
	·			
	of existence, no more than 90 of of which it is organized. (If the ibmitted)			
	Signatu	re of an authorized per	£03	
	in accordance with section 605 the Department of State consti			
	Sawan Hurst			

Typed or printed name of signee

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

PHI LIFE SCIENCES, LLC,

a limited liability company duly organized under the laws of the State of South Carolina on April 29th, 2016, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not malled notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 20th day of December, 2016

Mark Hammond Secretary of State

850-B17-6381

12/22/2016 9:55:38 AM PAGE 1/001 Fax Server



December 22, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

YEGALZOOM.COM INC.

SUBJECT: PHI LIFE SCIENCES, LLC

REF: W16000085330

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing coversheets.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Karen A Saly Regulatory Specialist II FAX Aud. #: H16000311681 Letter Number: 616A00027190

SECTION II AM 9: 43 SECTION OF SECTION OF ALLAHASSEE. FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314