1/27/2017

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

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Foreign Limited Liability Company AMBIO STAFFING, LLC

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FEB 07 2017

TO: Registration Section

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COVER LETTER

	Name of Limited Liability Company					
The enclosed Existence, an	l "Application by Fo id check are submitt	oreign Limited Liability Com ed to register the above refer	pany for Authorizati enced foreign limite	on to Tre d Jiabiliy	nnsnot Business in Florida," Certificate of y company to transact business in Florida.	
Please return	ali correspondence	concerning this matter to the	following:			
	BILL MCLA	JGHLIN				
		N	lame of Person			
	AMBTO STA	FFING, LLC				
	· · · · · · · · · · · · · · · · · · ·	F	іпт/Сотращ		and the same of th	
	1565 N CENI	RAL EXPY, STE 200	•			1.:
	∆ddi ess				· · · · · · · · · · · · · · · · · · ·	
	RICHARDSC	N, TX 75080				
		City/S	state and Zip Code			
	BMCLAUGHL	IN@SURGICAL SERVICE.	COM			
		E-mail address: (to be use	d for future annual r	eport not	ification)	
for l'unher in	вопинийот соло с ті	ng this matter, please call:				
MA	TT MANGANARO)	918 at ()	491-40		
	Name	of Contact Person	Ares Code	Day	tima Tolophone Number	
Divi Regi P.O.	ILING ADDRESS sion of Corporation istration Section Box 6327 alasses, FL 32314			Division logistrati Difton B 661 Exc	ADDRESS: of Corporations on Section uilding outive Center Circle se, FL 32301	
	check for the follow 125.00 Filing Fee	ving amount: □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee. Certificate of Status & Certified Copy	j.

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECISITER A FOREIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AMBIO STAFFING, 1 (Name of For	A.C eign Limited Liability Company; must include "Lin	nited Liability Company," "L.I.C.," c	or "LLC.")		-
(If name unavailable enter a	Remaie name adopted for the purpose of transacting	husiness in Statida The alternate re	me must in	olude "Lin	_ mited
Liability Company," "L.L.C,		a business are residue. Enourous accessiones		J11, 44 211	
2 TEXAS	3.	22908			_
company is organized)	of which foreign limited liability	(FEI number, if applicable	o)		
4. 01/01/2017			_		
	(Date first transacted business in Pforida, (See sections 605,0904 & 605,0905, F.S. to	t prior to registration.) letermine penalty liability)			
5. 1565 N CENTRAL E	XPY, STE 200	· · · · · · · · · · · · · · · · · · ·			
RICHARDSON, TX 7	5080	,		26	
	(Street Address of Principal Office	c)	- 2	·	750,000
6. 1565 N CENTRAL EX	(PY, STE 200		- 2005 ತಿಂಗಾರ	n tea	***
RICHARDSON, TX 7	5080			44	3-0-0
	(Mailing Address)	· · · · · · · · · · · · · · · · · · ·	- 70	+	Ш
7 Name and street address	ss of Florida registered agent: (P.O. Box NO.	Lacceptable)	$\frac{n}{n}$	<u>></u>	
Name:	C T CORPORATION SYSTEM		TATI ORIT	⇔	
Office Address:	1200 S PINE ISLAND RD	······································	A:	22	
	PLANTATION	, Florida 33324 (Zip code)			
	(City)	(Zip code)			
designated in this applica to complywith the provisi	egistered agent and to accept service of procestion, I hereby accept the appointment as regions of all statutes relative to the proper and comp position as registated agent. Color Color	stered agent and agree to act in to complete performance of my dutie Stotania Rocco	his capacit	ly. I furt	ther agree
	(Registered agent's si	gnature)			
8. The name, title or cars	acity and address of the person(s) who has/hav	e authority to manage is/are:			
BILL MCLAUGHLIN	1565 N. Central EXPY STE 200.	Richardson TX 75080			
Title: CFO				-	
				-	
9. Attached is a contribute jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, duly a of which it is organized. (If the certificate is indimitted)	arthenticated by the official having a foreign language, a translation	3 custody o of the certi	f records ficate un	s in the der oath
	Signature of an authoriz	od person			
This document is executed	f in accordance with section 605.0203 (1) (b), to the Department of State constitutes a third de	Florida Statutes. I am aware that a gree fulony as provided for in s.81	ny false inf 7.155, F.S	ormation ,	1

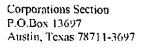
Typed or printed name of signer

BILL MCLAUGHLIN

2017-02-06 12:37:06 CST

12122023573 From: Kimberly Laughrey

Rolando B. Pablos Secretary of State





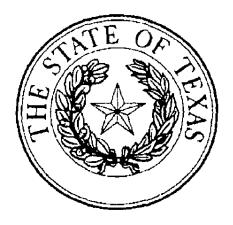
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for AmBio Staffing, LLC (file number 802098976), a Domestic Limited Liability Company (LLC), was filed in this office on November 12, 2014.

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 January 25, 2017.



RR

Rolando B. Pablos Secretary of State