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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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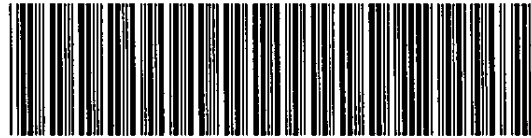
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA  
17 MAR 13 PM 2:07

MAR 14 2017

S. YOUNG



From the Desk of:  
**Chris Schultheis**

(312) 621-9700  
[cschultheis@beermannlaw.com](mailto:cschultheis@beermannlaw.com)

March 9, 2017

**VIA U.S. MAIL**

Florida Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: ITZAMEDICAL, LLC – Registration documents**  
**Our File No.: 1716-001**

To whom it may concern:

Enclosed please find the following documents regarding ITZAMEDICAL, LLC:

1. Registration Section Division of Corporations Cover Letter;
2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
3. Delaware Certificate of Good Standing dated March 3, 2017; and
4. Filing fee check in the amount of \$125.00.

Please register ITZAMEDICAL, LLC with the Florida Division of Corporations.

If you have any questions regarding this matter, please feel free to contact me.

Very Truly Yours,

**BEERMANN PRITIKIN MIRABELLI SWERDLOVE LLP**

*Chris Schultheis*  
Christopher J. Schultheis,  
Paralegal

SP/cjs  
Enclosures

RECEIVED  
FLORIDA DIVISION OF CORPORATIONS  
TALLAHASSEE, FL  
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ITZAMEDICAL, 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:

**LYLE S. GENIN**

\_\_\_\_\_  
Name of Person

**BEERMANN PRITTKIN MIRABELLI SWERDLOVE LLP**

\_\_\_\_\_  
Firm/Company

**161 N. CLARK STREET, SUITE 2600**

\_\_\_\_\_  
Address

**CHICAGO, ILLINOIS 60601**

\_\_\_\_\_  
City/State and Zip Code

**CORPORATEPARALEGAL@BEERMANNLAW.COM**

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 MAR 13 PM 2:07

For further information concerning this matter, please call:

**LYLE S. GENIN OR STEFANIA PIALIS**

**312**

**621-9700**

at ( )

\_\_\_\_\_  
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. ITZAMEDICAL, 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. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-0700947

(FEI number, if applicable)

4. \_\_\_\_\_

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

5. 5300 BROKEN SOUND BLVD. NW, SUITE 110

BOCA RATON, FLORIDA 33487

(Street Address of Principal Office)

6. 161 N. CLARK STREET, SUITE 2600

CHICAGO, ILLINOIS 60601

(Mailing Address)

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

Name: C T CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION

(City)

, Florida 33324

(Zip code)

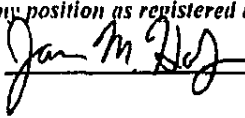
**Registered agent's acceptance:**

*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.*

James M. Halpin

Assistant Secretary

(Registered agent's signature)



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

JEFFREY A. LEVITETZ, MGR, 5300 BROKEN SOUND BLVD. NW, SUITE 110, BOCA RATON, FL 33487

ALAN RUTNER, PRES./SEC., 5300 BROKEN SOUND BLVD. NW, SUITE 110, BOCA RATON, FL 33487

LYLE S. GENIN, ASSISTANT SEC., 161 N. CLARK STREET, SUITE 2600, CHICAGO, IL 60601

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 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.

Lyle S. Genin, Assistant Secretary

Typed or printed name of signee

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 MAR 13 PM 2:07

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "ITZAMEDICAL, LLC" IS DULY FORMED UNDER  
THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A  
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF  
THE THIRD DAY OF MARCH, A.D. 2017.

17 MAR 13 PM 2:07  
SECRETARY OF STATE  
DELAWARE



6333992 8300

SR# 20171573681

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202136728

Date: 03-03-17