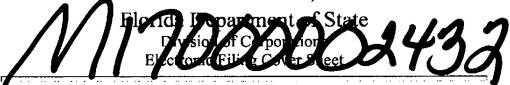
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Division of Corporations

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From:

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Account Number : 120160000017 : (800)345-4647 Phone Fax Number : (800)432-3622

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Foreign Limited Liability Company General Healthcare Resources, LLC

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MAR 2 3 2017

Krista Ali 800-432-3622

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

	IN I	KPOKIDY		
	TION 603.0002, PLOPILA STATUTES, THE ISINESS DYTHE STATEOFFLORINA	R POLLOWING S	S SUBMITTED TO RECESTER A P	OREIGN LIMITED LIABILITY
General Healtho	are Resources, LLC	lade "(Imited).	ability Company, Majatata, Gay or P	ELECTY TO THE STATE OF THE STAT
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of tr	runseoling busin	cee in Florids. The alternate name	must include "Limited
_{2.} Delaware	1	23-2720	209	
(Judadiction under the few company is urganized)	of which foreign limited liability		(PBI muinher, (Pappikanhie)	
4. 2/15/2017			Y	
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s. 2250 Hickory Ro	oad, Ste. 240, Plymouth M	eeting, PA	19462	. =
**************************************	(Street Address of Pitral)	pul Offica)	·	
s. 2250 Hickory Ro	ped, Ste. 240, Plymouth Mo	eeting, PA	19462	17 HAR 22
	(Mailing Address	xx)		
	•			=======================================
7. Name and street address	of Florida registered agent: (P.O. H	pace TON xo	(Child)	· \
Nanc:	Capitol Corporate Service	s, Inc.		
Office Address:	155 Office Plaza Dr Ste A	<u> </u>		
	Tallahassee		Plorids 32301	
	(City)		(Zlp code)	
lesignated in this applicati a complywith the provisio	ristered agent and to accept service of ion, I hereby accept the appointment as of all statutes relatively the property position as resistered reent.	l as registered	agent and agree to act in this to performance of my duther, Krista All, Asst. Secn of Capitol Corporate	capacity. I further agree and I am familler with and etary on behalf
R. The name, title or owner	alty and address of the person(s) who i	has/hava sutho	rity to manage is/are:	
See attachment	,,,,			
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his dogument is executed i	in sopordance with section 605.0203 (the Department of State constitutes a f	l) (b). Florida	Statutes, I am aware that any f	blee Information 55, P.S.
	· ·	W. Crater		•
	Typed or printed			
	r 2 han de hemiton:	***************************************		

Attachment

Name	Title	Address	
Anthony Rossi	President, Manager	2250 Hickory Road, Ste. 240 Plymouth Meeting, PA 19462	
jeffrey W. Crater	CFO	2250 Hickory Road, Ste. 240 Plymouth Meeting, PA 19462	
Joseph W. Kaplan	Manager	24 Greenway Plaza, Suite 965 Houston, Texas 77046	
John Quirk	Manager	2250 Hickory Road, Ste. 240, Plymouth Meeting, PA 19462	
Livingston Kosberg	Manager	24 Greenway Plaza, Suite 965 Houston, Texas 77046	
Brad Morgan	Manager	JPMorgan Chase Tower, 500 Travis St # 6160, Houston, TX 77002	



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GENERAL HEALTHCARE RESOURCES, 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 TWENTY-FIRST DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENERAL HEALTHCARE RESOURCES, LLC" WAS FORMED ON THE TENTH DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

6312548 8300 SR# 20171892820

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202234558

Date: 03-21-17