11/17/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000304275 3)))



H170003042753ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

| To: | | | |
|-------|---------------------------------------|---|------|
| | Division of Corporations | 5. E | 1 |
| | Fax Number : (850)617-6383 | :< | 6-1- |
| | (220)==: ==== | · | 2-1 |
| From: | | | • |
| | Account Name : C T CORPORATION SYSTEM | | |
| | Account Number : FCA000000023 | = | |
| | Phone : (512)418-6949 | · • | • |
| | Fax Number : (954)208-0845 | | ā |

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

| Cmail. | Address: | | | | |
|--------|----------|--|--|--|--|
| | | | | | |

Foreign Limited Liability Company GULF GATE OPERATING, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$125.00 |

J. HARRIE

COVER LETTER

| ΓQ: | | ration Section on of Corporatio | ons | | |
|------------------|---------------------------------|---|--|--|--|
| UB.JE | | ulf Gate Operatir | • | | |
| CD.IC | | | | Limited Liability Compa | any |
| he end Xisten | closed "A ice, and c | Application by Fo theck are submitt | oreign (jimited Liability Comed to register the above refu | pany for Authorization to enced foreign limited lia | o Transact Business in Florida." Certificate of ability company to transact business in Florida. |
| ease i | return al. | correspondence | concerning this matter to the | tollowing: | |
| | | Marc L. Rose | | | |
| | | | | lame of Person | |
| | | Veterinary Pra | ectice Partners, LLC | | |
| | | | F | irn/Company | |
| | | 601 S. Hender | son Road, Suite 155 | | |
| | | | | Address | 7 d 1 d 2 d 2 d 2 d 2 d 2 d 2 d 2 d 2 d 2 |
| | | King of Prussi | и, PA 19406 | | |
| | | | City/S | tate and Zip Code | o de delegación de la suprimina de delegación de la suprimina de la secuencia del secuencia de la secuencia de la secuencia del secuencia de la secuencia del se |
| | | mrose@vetpartr | ers.com | | |
| | | | E-mail address: (to be use | d for future annual repor | t notification) |
| or furt | her infor | mation concernir | ng this matter, please call: | | |
| | Marc 1 | Rose | | 866 m. 838 | 8-7278 x1107 |
| | | Name (| of Contact Person | Area Code | Daytime Telephone Number |
| | Division Registra P.O. Bo | NG ADDRESS: n of Corporation ation Section ix 6327 ssee, FL 32314 | <u>:</u> \$ | Divis Regis Clific 2661 | EFT ADDRESS: sion of Corporations stration Section on Building Executive Center Circle thussee, FL 32301 |
| iclose | | eck for the follow ,00 Filing Fee | ring amount: ☐ \$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 635,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY

| | BINESS IN THE STATE OF FLORIDA: | | |
|--|--|---|--|
| [Gulf Gate Operating, L. (Name of Foreign | LC Limited Limbiny Company; must include "Limited | d Liability Company," "L.L.C.," or "LD | C(-*) |
| (H name inspeciality, enter stieniste is | nne adopted for the pergeneral regunsacting business in Flor | rida. The attenuate assure must include "Lignited | Linbility Congram, ""LLC," or "LLC,") |
| 2 Delaware | | _ | |
| (Artisdiction under the law of wi | ach foreign binned hisbony company is organized) | | menber, il apphieble) |
| 4. 11/6/17 | | | |
| | (Date fast transacted business in Florida, 1/ 2780/10- (See sections 605 17204 & 1935 0505, F.S. to determi | costration) re penalty liability) | |
| 5, 2316 Stickney Point R | ond | 6. 601 S. Henderson Road | L |
| (Street Address of F | nrepal Office) | | Address) |
| Sarusota, FL 34231 | | Suite 155 | |
| | | King of Prussia, PA 194 | 106 |
| 7. Name and street address | s of Florida registered agent: (P.O. Box | NOT acceptable) | |
| Name: | C T Corporation System | | |
| Office Address: | 1200 South Pine Island Road | | |
| | Plantation | , Florida 33324 | <u> </u> |
| Registered agent's accep | | رن2) | ends) |
| - | by: CT Corporation System (Registered agent's | | 8-Thereign marks 4-9 |
| | | • | |
| 8. The name, title or capa Title or Capacity: | city and address of the person(s) who ha Name and Address: | s/have authority to manage is/arc Title or Capacity: | e: Name and Address: |
| CEO | Richard Lester | CFO | Mare L. Rose |
| | 601 S. Henderson Road, Ste16 King of Pressia, PA 19406 | - | 601 S. Henderson Road, Suin King of Prussia, PA 19406 |
| | | - | |
| (Use attachments if neces- | sary) | • | |
| | of existence, no more than 90 days old, of which it is organized. (If the certificate builted) | | |
| | ited in accordance with section 605,0203 the Department of State consumors a thi | | |
| | | | |
| | Standard of | al authorised faction | |
| | Marc L. Rose | | |
| | funed with | Bowel save of cores | · |

Delaware The First State

Page i

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GULF GATE OPERATING, 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 SEVENTH DAY OF NOVEMBER, A.D. 2017.

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

Authentication: 203530995

Date: 11-07-17