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Florida Department of State

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Foreign Limited Liability Company
Mid-South Home Care Services, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 06 2017
J. HARRIS

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Mid-South Home Care Services, 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:

Jenny Kaelin

Name of Person

Kindred Healthcare

Firm/Company

630 South Fourth Street

Address

Louisville, KY 40202

City/State and Zip Code

jenny.kaelin@kindred.com

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

For further information concerning this matter, please call:

Jenny Kaelin

502

596-7044

Name of Contact Person

at ()

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 605.0202, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Mid-South Home Care Services, 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. Alabama 3. 82-0559231
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. n/a
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0201 & 605.0202, F.S. to determine penalty liability))
5. 680 South Fourth Street
(Street Address of Principal Office)
Louisville, KY 40202
6. 680 South Fourth Street
(Mailing Address)
Louisville, KY 40202
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, Florida 33324
(City) (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.

By: C T Corporation System James M. Halpin
(Registered agent signature) Assistant Secretary

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Joseph Landenwich 680 South Fourth Street Louisville, KY 40202	Manager	Doug Cunniffe 680 South Fourth Street Louisville, KY 40202
Manager	Stephen Cunniffe 680 South Fourth Street Louisville, KY 40202		

(Use attachments if necessary)

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)

10. 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.

Joseph Landenwich
(Signature of an authorized person)

Joseph Landenwich

(Typed or printed name of signer)

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

**I, John H. Merrill, Secretary of State of Alabama, having custody of the
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Mid-South Home Care
Services, LLC was formed in Houston County, Alabama on August 12, 2002. The
Alabama Entity Identification number for this entity is 684-090. I further certify
that the records do not disclose that said entity has been dissolved, cancelled or
terminated.



In Testimony Whereof, I have hereunto set my
hand and affixed the Great Seal of the State, at the
Capitol, in the city of Montgomery, on this day.

12/04/2017

Date

20171204000017578

John H. Merrill

Secretary of State