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To:

Division of Corporations

Fax Number : (850) 61.7-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017

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

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

Email Address:\_

## Foreign Limited Liability Company TEMPUS, LLC

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\$160.00

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Corporate Filing Menu

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## COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	T: Tempus, LLC  Name of Limited Liability Company
	Name of Limited Liability Company
The enc Existent	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please r	turn all correspondence concerning this matter to the following:
	Name of Person
	Capitol Services - Corporate Filings Team
	Firm/Company
	515 East Park Avenue 2nd Fl
	Address
	Tallahassee FL 32301
	City/State and Zip Code
	businessfilings@emeraldhs.com
	E-mail address: (to be used for future annual report notification)
For fur	her information concerning this matter, please call:
	at ( 855 ) 498-5500
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:  Division of Corporations  STREET ADDRESS:  Division of Corporations
	Division of Corporations  Registration Section  Registration Section
	P.O. Box 6327 Cliffon Building
	Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301
Enclose	d is a check for the following amount:  \$\Begin{align*} \text{S125.00 Filing Fee} & B\$130.00 Filing Fee & B\$155.00 Filing Fee & B\$160.00 Filing Fee, Certificate of Status & Certified Copy  \text{Certificate of Status} & Certified Copy  \$\text{Certified Copy} & \text{Of Status & Certified Copy}  \text{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. Tempus, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Emerald Health Services, LLC (If name unavailable, enter efforms a name adopted for the purpose of transacting bosiness in Florids. The almost name must include "Limited Liability Company," "L.L.C," or "LLC," California (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 6. 999 N. Sepulveda Blvd -5. 999 N. Sepulveda Blvd - 7th Floor (Mailing Address) (Street Address of Principal Office) Attn: Mark Siegel Attn: Mark Siegel El Segundo, CA 90245 El Segundo, CA 90245 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Capitol Corporate Services, Inc. Name Office Address: 515 East Park Avenue 2nd Fl Florida 32301 Tallahassee 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. Kim Tadlock, Assistant Secretary on high Tadlock signature Services, Inc. (Registered agent's signature) Kim Tadlock, Assistant Secretary on 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Mark Stagen Manager 999 N. Sepulveda Blvd - 7th Floor El Segundo, CA 90245 (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 fell-sign 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. Mark Sical Signature of an authorised person Mark Siegel, President

Typed or printed name at signer

## State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: TEMPUS, LLC

FILE NUMBER: FORMATION DATE:

LADB+ LOKWALTON INV

JURISDICTION:

STATUS:

200035010122

12/12/2000

DOMESTIC LIMITED LIABILITY COMPANY

CALIFORNIA

ACTIVE (GOOD STANDING)

I. ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 21, 2017.

ALEX PADILLA
Secretary of State

re:

MMS

NP-25 (REV 01/2015)