

M1800000286

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.

((H180000110713)))



H180000110713ABCT

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
Fax Number : (850)637-6383

From: Account Name : NRAI SERVICES, LLC
Account Number : 120080000104
Phone : (302)674-4089
Fax Number : (302)674-5266

2018 JAN 10 AM 9:07

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

Email Address: w.malcolm@centinelspine.com

Foreign Limited Liability Company
CENTINEL SPINE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED

JAN 10 2018

JAN 11 2018
J. HARRIS

Electronic Filing Menu Corporate Filing Menu

Help

H18000011071 3

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

IN COMPLIANCE WITH SECTION 605.022, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CENTINEL SPINE, 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.

(FEF number, if applicable)

4. upon filing

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0204 & 605.0205, F.S. to determine penalty liability)

5. 505 PARK AVENUE, 14TH FLOOR

(Street Address of Principal Office)

NEW YORK, NY 10022

6. 505 PARK AVENUE, 14TH FLOOR

(Mailing Address)

NEW YORK, NY 10022

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

Name: NRAI Services, Inc.

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: NRAI Services, Inc.

(Registered agent's signature)

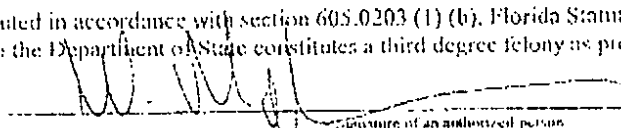
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
CEO	John Viscogliosi 505 PARK AVE, 14TH FL. NEW YORK, NY 10022	CEO/COO	Wendy DiCicco 900 Airport Rd, Suite 3b West Chester, PA 19380
Controller	Wayne Malcolm 505 PARK AVE, 14TH FL. NEW YORK, NY 10022	Senior VP	Vinay Gandhi 505 PARK AVE, 14TH FL. NEW YORK, NY 10022

(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.



Signature of an authorized person

Wayne Malcolm

Typed or printed name of signer

H18000011071 3

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CENTINEL SPINE, 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 NINTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTINEL SPINE,
LLC" WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D. 2017.

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



6512453 8300

SR# 20180147821

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 201942286

Date: 01-09-18

H18000011071 3