

M18000002816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

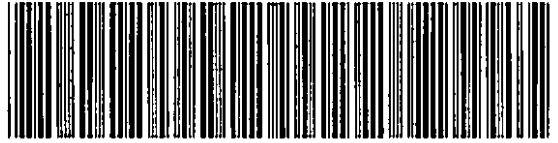
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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18 MAR 22 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. HNI RESOURCES, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.I.C.")

(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 "L.I.C.")

2. TEXAS (Jurisdiction under the law of which foreign limited liability company is organized) 3. 82-4034647 (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7500 Rialto Blvd., Bldg 1, Suite 140 (Street Address of Principal Office)
Austin, Texas 78735

6. 7500 Rialto Blvd., Bldg 1, Suite 140 (Mailing Address)
Austin, Texas 78735

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

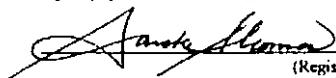
Name: Corporation Service Company

Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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.

Sarah Thomas
 Assistant Secretary


(Registered agent's signature)

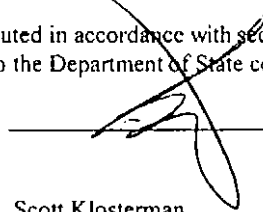
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Hospitalists Now, Inc.</u> <u>7500 Rialto Blvd, Bldg 1</u> <u>Ste 140, Austin, TX 78735</u>	<u>President/CEO</u>	<u>Michael Gonzales</u> <u>7500 Rialto Blvd, Bldg 1</u> <u>Ste 140, Austin, TX 78735</u>
_____	_____	<u>CFO</u>	<u>Scott Klosterman</u> <u>7500 Rialto Blvd, Bldg 1</u> <u>Ste 140, Austin, TX 78735</u>
_____	_____	_____	_____

(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

Scott Klosterman

 Typed or printed name of signer

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 Name: Corporation Service Company
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18 MAR 22 PM 2:03
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
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Sarah Thomas,
 Assistant Secretary

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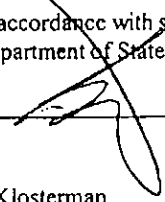
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<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Hospitalists Now, Inc.</u> <u>7500 Rialto Blvd, Bldg 1</u> <u>Ste 140, Austin, TX 78735</u>	<u>President/CEO</u>	<u>Michael Gonzales</u> <u>7500 Rialto Blvd, Bldg 1</u> <u>Ste 140, Austin, TX 78735</u>
_____	_____	<u>CFO</u>	<u>Scott Klosterman</u> <u>7500 Rialto Blvd, Bldg 1</u> <u>Ste 140, Austin, TX 78735</u>
_____	_____	_____	_____

(Use attachments if necessary)

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 Signature of an authorized person
 Scott Klosterman

 Typed or printed name of signer

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Rolando B. Pablos
Secretary of State

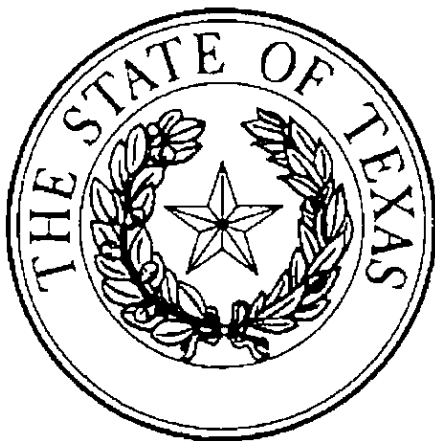
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for HNI Resources, LLC (file number 802903000), a Domestic Limited Liability Company (LLC), was filed in this office on January 09, 2018.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 08, 2018.



A handwritten signature in black ink, appearing to read "R. Pablos".

Rolando B. Pablos
Secretary of State



HNIhealthcare.com

phone 512 730 3060

fax 512 215 8124

7500 Rialto Boulevard
Building 1 | Suite 140
Austin, Texas 78735

March 19, 2018

Via US Priority Mail

Division of Corporations
Registration Section
FLORIDA DEPARTMENT OF STATE
P. O. Box 6327
Tallahassee, FL 32314

RE: Application for Authorization to Transact Business in Florida
HNI Resources, LLC, a Texas limited liability company

To whom it may concern:

Enclosed for consideration, please find the following documents:

1. Cover Letter;
2. Application for Authorization to Transact Business in Florida;
3. Certificate of Fact; and
4. Check in the amount of \$125.00, payable to Florida Department of State, representing the filing fee.

Should you have any questions or require any additional information, please feel free to contact me by telephone (956) 878-6074 or email rebecca@hnihc.com.

Very truly yours,

A handwritten signature in black ink, appearing to read "Rebecca A. Solis".

Rebecca A. Solis, General Counsel

RAS/tm

Enclosures: as stated herein



Office of the Secretary of State

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Rolando B. Pablos
Secretary of State