

118000004673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
MAIL ROOM, 110010

K. SALY

MAY 15 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Point Guard Care Management 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:

Marsha Boggess

Name of Person

Point Guard Care Management LLC

Firm/Company

9822 Tapestry Park Circle Ste 208

Address

Jacksonville, FL 32246

City/State and Zip Code

tgarwood@focusone.net

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

For further information concerning this matter, please call:

Tanya Garwood

904
at ()

616-3121

Name of Contact Person

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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Point Guard Care Management LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Point Guard Care Management of FL 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. 37-1871185 (FEI number, if applicable)
4. April 1, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 9822 Tapestry Park Circle Ste 208
(Street Address of Principal Office)
Jacksonville, FL 32246
6. 9822 Tapestry Park Circle Ste 208
(Mailing Address)
Jacksonville, FL 32246

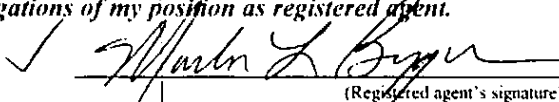
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Marsha Boggess

Office Address: 9822 Tapestry Park Circle, Ste 208
Jacksonville, FL , Florida 32246
(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.


(Registered agent's signature)

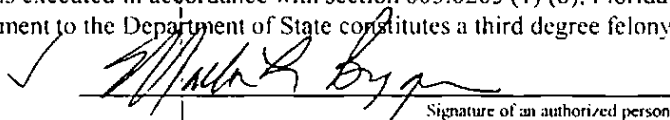
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Member</u>	<u>Marsha Boggess</u> <u>9822 Tapestry Prk Cir #208</u> <u>Jacksonville, FL 32246</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

Marsha Boggess

Typed or printed name of signee

FILED
18
MAY 11 PM 2:54
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POINT GUARD CARE MANAGEMENT, 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 FIRST DAY OF MAY, A.D. 2018.

FILED
18 MAY 11 PM 2:54
SECRETARY OF STATE
DELAWARE




Jeffrey W. Bullock, Secretary of State

6577565 8300

SR# 20182952727

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

Authentication: 202614581

Date: 05-01-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2018

MARSHA BOGGESS
POINT GUARD CARE MANAGEMENT, LLC
9822 TAPESTRY PARK CIR, STE. 208
JACKSONVILLE, FL 32246

SUBJECT: POINT GUARD CARE MANAGEMENT OF FL LLC
Ref. Number: W18000037054

We have received your document for POINT GUARD CARE MANAGEMENT OF FL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 018A00007940

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2018 MAY 11 AM 10:20

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL