

M18000004874

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

(Document Number)

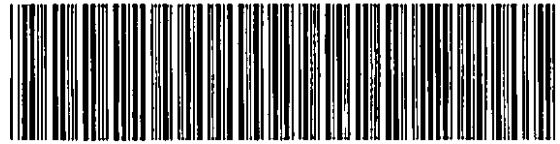
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W18-41048

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

M. MILLIGAN

MAY 22 2018

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Calbanc 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:

**Ian Kideys**

\_\_\_\_\_  
Name of Person

**Calbanc LLC**

\_\_\_\_\_  
Firm/Company

**8451 Miralani Drive Suite F**

\_\_\_\_\_  
Address

**San Diego, CA 92126**

\_\_\_\_\_  
City/State and Zip Code

**ian@calbanc.com**

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

For further information concerning this matter, please call:

**Ian Kideys**

\_\_\_\_\_  
Name of Contact Person

**858**

at (\_\_\_\_\_) Area Code

**322-6080**

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 2, 2018

CALBANC LLC  
ATTN: IAN KIDEYS  
8451 MIRALANI DR, STE F  
SAN DIEGO, CA 92126

SUBJECT: CALBANC LLC  
Ref. Number: W18000041048

We have received your document for CALBANC LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Written approval and clearance of the words BANK, BANC, BANCO, BANQUE, BANKER, BANKING, TRUST COMPANY, SAVINGS AND LOAN ASSOCIATION, SAVINGS BANK or CREDIT UNION, or words of similar import in any context or any manner must be obtained from the Office of Financial Regulation, pursuant to section 655.922(2a), Florida Statutes.

If the proposed name is approved by the Office of Financial Institutions, resubmit the document and the approval letter to the Division of Corporations for filing. The Office of Financial Institutions' phone number is 850-410-9800.

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.

Michelle Milligan  
Senior Section Administrator

Letter Number: 018A00009031

RECEIVED

2018 MAY 21 AM 10:52

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



# FLORIDA OFFICE OF FINANCIAL REGULATION

[www.FLOFR.com](http://www.FLOFR.com)

**DREW J. BREAKSPEAR**  
COMMISSIONER

May 17, 2018

Mr. Ian Kideys  
8451 Miralani Drive, Suite F  
San Diego, CA 92126

Re: Calbanc LLC dba Versed Care

Dear Mr. Kideys:

Thank you for your recent correspondence requesting approval for use of the above-referenced name.

It is the opinion of this Office that the corporate name (Calbanc LLC dba Versed Care) is definitive enough to differentiate the business being conducted from that of a commercial bank, trust company or credit union. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

A handwritten signature in black ink, appearing to read "JWS", is written over a horizontal line.

Jeremy W. Smith  
Director  
Division of Financial Institutions

JWS/trd

cc: Lyn Shoffstall, Chief, Bureau of Commercial Recordings, Division of Corporations,  
Department of State

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. Calbanc LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. State Of California

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-2518088

(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. 8451 Miralani Drive, Suite F

(Street Address of Principal Office)

San Diego, CA 92126

6. 8451 Miralani Drive, Suite F

(Mailing Address)

San Diego, CA 92126

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

Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Dr. STE 150A

Tampa

(City)

Florida 33607

(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.

Bee Hume

(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:

Managing Member

Ian Kideys

8451 Miralani Drive Suite F  
San Diego, CA 92126

(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.

Tu K  
Signature of an authorized person

Ian Kideys

Managing Member

Typed or printed name of signee

FILED  
2018 MAY 21 AM 10:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME: CALBANC LLC

FILE NUMBER: 201722610513  
FORMATION DATE: 08/07/2017  
TYPE: DOMESTIC LIMITED LIABILITY COMPANY  
JURISDICTION: CALIFORNIA  
STATUS: 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 March 13, 2018.

ALEX PADILLA  
Secretary of State