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(Requestor's Name)						
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(City/State/Zip/Phone #)						
. PICK-UP WAIT	MAIL					
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of	of Status					
Special Instructions to Filing Officer:						

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COVER LETTER

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TO:	Registration Section Division of Corporation	ns				
SUBJE	- Angr.	rd Administrators, LLC				
50201	ECT:		f Limited Liability (Company	-	-
The en Exister	closed "Application by Fo ace, and check are submitt	reign Limited Liability Con ed to register the above refe	mpany for Authoriza renced foreign limit	tion to Transacted liability con	t Business in Florida, ipany to transact busi	" Certificat ness in Floi
Please	return all correspondence	concerning this matter to th	e following:			
	Karen Guthri	9				
			Name of Person	<u> </u>		_
	Cahaba Safe	guard Administrators. LL	С			
			Firm/Company			- <u>==</u> - <u>==</u>
	375 Rivercha	se Parkway East			~.	ight un 2
•			• 11 · · ·		.:	25
			Address			» į
•	Birmingham,	AL 35244			••	آ خ
		City/	State and Zip Code		r.	<u>.</u> 2
	karen.guthrie@	bcbsal.org				_
	-	E-mail address: (to be use	ed for future annual	report notificat	ion)	_
For fur	ther information concernir	ng this matter, please call:				
	Karen Guthrie		205 at (820-6006		
	Name e	of Contact Person	Area Code	Daytime '	Telephone Number	-
	MAILING ADDRESS: Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADI Division of Co Registration Se Cliffon Buildin 2661 Executive Tallahassee, FI	rporations ection ig Center Circle	
Enclose	ed is a check for the follow S125.00 Filing Fee	ring amount: □ \$130.00 Filing Fee & Certificate of Status	□ \$155,00 Filin Certified Copy	•	160.00 Filing Fee, C Status & Certified Co	

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. Cahaba Safeguard A	dministrators, LLC Limited Liability Company; must include "Limite	1115340.	N. C		
(Name of Poreign	tamited Liability Company; must include "famile	d Frabili	y Company, 12.12.C., or 12.1.C.)		
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	nda The a	Iternate name must include "Limited Liabi	dity Company," "L.L.C," or "LLC.")	
₂ Alabama		3.	02-0594235		
(Jurisdiction under the law of w	nich foreign limited liability company is organized)		(FEI numbe	r, if applicable)	
4 06/06/2018					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registratio ne penalty	1) hability)		
5 375 Riverchase Park	way East	6.	375 Riverchase Parkway	East	
(Street Address of I	•		(Mailing Addre	75)	
Birmingham, AL 35244			Birmingham, AL 35244		
					
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT	acceptable)	.	
. Name:	C T Corporation System		•	<u> </u>	
	1200 South Pine Island Road			E I	
Office Address:	1200 South Fille Island Noad	_		2	
	Plantation (City)		, Florida 33324		
designated in this applica to comply with the provise	gistered agent and to accept service of partion, I hereby accept the appointment actions of all statutes relative to the proper sof my position as registered agent. CT Corporation System (Registered agent's	s regist and co	ered agent and agree to act i	n this capacity; I further a	grei
S. The name, title or capa	ncity and address of the person(s) who ha	is/have	authority to manage is/are:		
Title or Capacity:	Name and Address:		itle or Capacity:	Name and Address:	
President	Randy J. Heal				
	375 Riverchase Pkwv E Birmingham, AL 35244	 - -			
Counsel	Karen S. Guthrie				
	375 Riverchase Pkwv E Birmingham, AL 35244				
(Use attachments if neces	•	-			
9. Attached is a certificate	of existence, no more than 90 days old, of which it is organized. (If the certificat				
	o the Department of State constitutes a the	ird deg 			

Lyped or printed name of signee

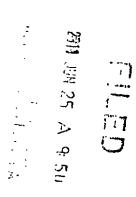
Karen S. Guthrie

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Cahaba Safeguard Administrators, LLC was formed in Jefferson County, Alabama on April 11, 2002. The Alabama Entity Identification number for this entity is 681-578. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.





20180621000021230

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

06/21/2018

Date

X 24. Menill

John H. Merrill

Secretary of State