## 701/02-07/10/4:35/CS Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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.

(((H190000409883)))



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)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

: (954)208-0845

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

Email Address:\_

#### Foreign Limited Liability Company MHM HEALTH PROFESSIONALS, LLC

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

4 PAGE FAX

### PLEASE HONOR THE ORIGINAL SUBMISSION DATE OF 02/04/2019

Electronic Filing Menu Corporate Filing Menu

Help

V HERRING

1/1

850-617-6381

2/6/2019 3:20:57 PM PAGE 1/001 Fax Server



February 6, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: MHM HEALTH PROFESSIONALS, LLC

REF: W19000012124

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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) 245-6050.

Valerie Herring Regulatory Specialist III FAX Aud. #: H19000040988 Letter Number: 719A00002633

2019 FEB - 7 AM 11: 13

P.O BOX 6327 - Tallahassee, Florida 32314

. . .

#### 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:

(Chor. Grav wanneed basines in Florida, if prov. to repursulan)  (See section 60,000 & 60,000 & 60,000   5.5 to desenate pauly) labelety)  (See section 60,000 & 60,000 & 60,000   5.5 to desenate pauly) labelety)  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety)  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety)  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety)  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety)  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety  (See section 60,000 & 60,000   5.5 to desenate pauly) labelety  (See section 60,000   6,000	•	d Liability Company, must include "Limited	company company, action, or the	,
(Chor from removed bashot in Planies, If your an enquantion)  (Sever took the State of Planies (From an enquantion)  (Sever took St. 610 6, 7700 Forsyth Blvd., Stc. 800 (Sever took 50,0004 & 401,000, F.S. to descense penalty liablesty)  (Sever took state of Planies (From an enquantion)  (Sever took state of Planies (From a enquantion)  (Chor)  (Cho	uno unovailable, enter alternate name ade	isted for the purpose of transacting beatiess in Flor	ida. The alternate name must include "Limited Li-	ibility Company," "L.L.C," or "LLC.")
(Due for winnered below of which is required belows to Florida. (I prov. to requiretion)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004 & 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004, F.S. to determine penalty lichidary)  (See section 60:0004, F.S. to determine penalty lichidary)  (See name as section 60:0004, F.S. to determine penalty lichidary)  (Copy)  (C	Delaware		2 46-1734817	
Spring Hill Road, Stc. 610   6   7700 Forsyth Blvd. Stc. 80475   1700 Forsyth Blvd. Stc. 804		eign innited liability company is organized)		her, if appricable)
Spring Hill Road, Ste. 610   6   7700 Forsyth Blvd. Ste. 80475   St. Louis, MO 63105	· · · · ·		* " " "	
Spring Hill Road, Stc. 610   6   7700 Forsyth Blvd. Stc. 80475   1700 Forsyth Blvd. Stc. 804	- d	Date first transacted basiness in Florida, if motor to a	respection	<del></del>
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: C T Corporation System  Office Address: 1200 South Pine Island Road  Plantation , Florida 33324  (Cip toda)  Plantation , Florida 133224  (Cip toda)  (Cip toda)  (Cip toda)  Plantation , Florida 133224  (Cip toda)  (Cip toda)  (Cip toda)  (Cip toda)  Plantation , Florida 133224  (Cip toda)  (Cip toda	(5	Sca arctions 605,0904 & 605,0905, F.S. to determin	se penalty (isbuily)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: C T Corporation System  Office Address: 1200 South Pine Island Road  Plantation , Florida 33324  Plantation , Florida 3124  Plantation of Plantation Plantation of Plantation Plantation Plantation Plantation Plantati				
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: C T Corporation System  Office Address: 1200 South Pine Island Road  Plantation , Florida 33324  (Cty)		Office)	· · · · · · · · · · · · · · · · · · ·	一
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: C T Corporation System  Office Address: 1200 South Pine Island Road  Plantation , Florida 33324  (Clop	Vicinia, VA 22182		St. Louis, WC 03103	
Name: CT Corporation System  Office Address: 1200 South Pine Island Road  Plantation Florida 33324  (Clay tools)  egistered agent's acceptance:  aving been named as registered agent and to accept service of process for the above stated limited liability company at the prositions of all statutes relative to the proper and complete performance of my duties, and I am familiar to accept the obligations of my position as registered agent.  By: CT Corporation System  (Registered agent's allower)  (Registered agent's allower)  (Registered agent and agene to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar to accept the obligations of my position as registered agent.  By: CT Corporation System  (Registered agent's allower)  (Registered agent and address of the person(s) who has/have authority to manage is/are:  Title or Capacity: Name and Address:  Member MHM Services Inc.  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager John Campbell  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager Steven Wheeler  Keith Lucking  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information browitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	<del></del>			<u> </u>
Name: CT Corporation System  Office Address: 1200 South Pine Island Road  Plantation Florida 33324  (Ctry) (Ctry)  registered agent's acceptance:  aving been named as registered agent and to accept service of process for the above stated limited liability company at the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar to accept the obligations of my position as registered agent.  By: CT Corporation System  (Registered agent's library)  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:  Member MHM Services Inc.  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager John Campbell  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager Steven Wheeler  Reith Lucking  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information bruitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
Office Address:    1200 South Pine Island Road   Plantation   Plantati	Name and street address of F	lorida registered agent: (P.O. Box	NOT acceptable)	
Office Address: 1200 South Pine Island Road  Plantation  (Clty)  Clty  Plantation  (Clty)  Plantation  (Clty)  (Clty)  Plantation  (Clty)  Plantation  (Clty)  (Clty)  Plantation  (Clty)  Plantation  (Clty)  (Clty)  Plantation  Plantat	СТ	Composition System		<b>5</b>
Plantation , Florida 33324  (Cly) (C	Name:			
registered agent's acceptance:  aving been named as registered agent and to accept service of process for the above stated limited liability company at the p signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar vid accept the obligations of my position as registered agent.  By: CT Corporation System  (Registered agent)  (Regist	Office Address: 120	00 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·	조선 호
registered agent's acceptance:  aving been named as registered agent and to accept service of process for the above stated limited liability company at the p signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar vid accept the obligations of my position as registered agent.  By: CT Corporation System  (Registered agent)  (Regist	71	ntation	22224	
egistered agent's acceptance: awing been named as registered agent and to accept service of process for the above stated limited liability company at the p signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar v and accept the obligations of my position as registered agent.  By:  C T Corporation System  (Registered agent)  (Regi	ria			4-1
aving been named as registered agent and to accept service of process for the above stated limited liability company at the p signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar of accept the obligations of my position as registered agent.  By: CT Corporation System  (Registered agent agent a the burst)  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:  Member MHM Services Inc. Manager Jesse Hunter  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager John Campbell Manager Steven Wheeler  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager Steven Wheeler  Keith Lucking  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Jse attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duty authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any folse information brmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	egistered agent's accentance			· ·
The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  Title or Capacity:  Member  MHM Services Inc.  Manager  Jesse Hunter  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Manager  John Campbell  Manager  John Campbell  Manager  John Campbell  Manager  Steven Wheeler  Keith Lucking  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Jesse Hunter  7700 Forsyth Blvd., Ste.  St. Louis, MO 63105  Manager  John Campbell  Manager  Steven Wheeler  Keith Lucking  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Jesse Hunter  7700 Forsyth Blvd., Ste.  St. Louis, MO 63105  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information binuited in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.	a accept the obligations of m	ty position as registered agent.	0 4010	
Member MHM Services Inc. Manager Jesse Hunter    1593 Spring Hill Rd., Stc. 610   Vienna, VA 22182   St. Louis. MO 63105		C T Corporation System	1 130	
Member MHM Services Inc. Manager Jesse Hunter  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  Manager John Campbell Manager Steven Wheeler  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  Manager John Campbell Manager Steven Wheeler  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  Jesse attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information bimitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		C T Corporation System	1 130	
Manager   John Campbell   Manager   Steven Wheeler	By:	C T Corporation System (Registered agent's s	Indusc)	
Manager  John Campbell  Manager  John Campbell  Manager  Steven Wheeler  Keith Lucking  Vienna, VA 22182  Jeguna, VA 22182  Manager  Steven Wheeler  Keith Lucking  1593 Spring Hill Road, Ste. 610  Vienna, VA 22182  Jeguna, VA 22182  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information bimitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.	By:  The name, title or capacity a	C T Corporation System (Registered agent's s and address of the person(s) who ha	s/have authority to manage is/are:	
Manager  John Campbell  Manager  Steven Wheeler  1593 Spring Hill Rd., Ste. 610  Vienna, VA 22182  Use attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information abmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By:  The name, title or capacity a  Title or Capacity:	C T Corporation System  (Registered agent's s and address of the person(s) who ha  Name and Address:	s/have authority to manage is/are: Title or Capacity:	Name and Address:
1593 Spring Hill Rd., Ste. 610   Keith Lucking   1593 Spring Hill Road, Ste. 610, Vienna, VA 22182   1593 Spring Hill Road, Ste. 610, Vienna, VA 22182	By:  The name, title or capacity a  Title or Capacity:	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.	s/have authority to manage is/are:  Title or Capacity:  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste
I 593 Spring Hill Rd., Ste. 610 Vienna, VA 22182  Use attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information bimitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By:  The name, title or capacity a  Title or Capacity:	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610	s/have authority to manage is/are:  Title or Capacity:  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste
Vienna, VA 22182  Use attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information is builted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By: The name, title or capacity a Title or Capacity: Member	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Ste. 610 Vienna, VA 22182	s/have authority to manage is/are:  Title or Capacity:  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd., Ste St. Louis, MO 63105
Use attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information is bruitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By: The name, title or capacity a Title or Capacity: Member	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd., Ste St. Louis, MO 63105  Steven Wheeler
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information bruitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By: The name, title or capacity a Title or Capacity: Member	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Ste. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Ste. 610	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd., Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking
risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information abmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By: The name, title or capacity a Title or Capacity: Member  Manager	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Ste. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Ste. 610	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd., Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1593 Spring Hill Road, Ste.
risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information abmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By: The name, title or capacity a Title or Capacity: Member  Manager	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Ste. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Ste. 610	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd., Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1593 Spring Hill Road, Ste.
the translator must be submitted).  This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information builtted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By:  The name, title or capacity a  Title or Capacity:  Member  Manager  Jse attachments if necessary)	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd., Ste. St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1523 Spring Hill Road, Ste. 610, Vienna, VA 22182
). This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information ibmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By:  The name, title or capacity a  Title or Capacity:  Member  Manager  Je attachments if necessary)  Attached is a certificate of ex	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1523 Spring Hill Road, Ste 610, Vienna, VA 22182  aving custody of records in the state of th
ibmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	By:  The name, title or capacity a  Title or Capacity:  Member  Manager  Jes attachments if necessary)  Attached is a certificate of exrisdiction under the law of wh	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1523 Spring Hill Road, Ste 610, Vienna, VA 22182  aving custody of records in the state of th
	By:  The name, title or capacity a Title or Capacity:  Member  Manager  Jes attachments if necessary)  Attached is a certificate of ex risdiction under the law of whithe translator must be submitted.	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  distance, no more than 90 days old, distance, no more than 90 days old, distance, it is organized. (If the certificate ted)	s/have authority to manage is/are:  Title or Capacity:  Manager  Manager  July authenticated by the official he is in a foreign language, a transla	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1523 Spring Hill Road, Ste 610, Vienna, VA 22182  aving custody of records in the certificate under of
	By:  The name, title or capacity a Title or Capacity:  Member  Manager  Jes attachments if necessary)  Attached is a certificate of ex risdiction under the law of whithe translator must be submitted. This document is executed in	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  stistence, no more than 90 days old, of the it is organized. (If the certificate ted) in accordance with section 605.0203	Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1523 Spring Hill Road, Sie, 610. Vienna, VA 22182  aving custody of records in the certificate under one of the certificate under one that any folse information
	By:  The name, title or capacity a  Title or Capacity:  Member  Manager  Jes attachments if necessary)  Attached is a certificate of ex- risdiction under the law of whithe translator must be submitted.  This document is executed in	C T Corporation System  (Registered agent's a and address of the person(s) who has Name and Address:  MHM Services Inc.  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  John Campbell  1593 Spring Hill Rd., Stc. 610 Vienna, VA 22182  stistence, no more than 90 days old, of the it is organized. (If the certificate ted) in accordance with section 605.0203	Manager	Name and Address:  Jesse Hunter  7700 Forsyth Blvd. Ste St. Louis, MO 63105  Steven Wheeler  Keith Lucking 1523 Spring Hill Road, Sie, 610. Vienna, VA 22182  aving custody of records in the certificate under one of the certificate under one that any folse information

Tricia Dinkelman, VP of Tax of the sole Member, MHM Services Inc.

Typod or printed came of signee



# <u>Delaware</u>

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MHM HEALTH PROFESSIONALS, 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 FOURTH DAY OF FEBRUARY, A.D. 2019.

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

FILED

2019 FEB - 4 AM 9: 54

ALLAHNSSEE, FLORIDA

TOTAL

5250890 8300

SR# 20190720986
You may verify this certificate online at corp.delaware.gov/authver.shtml

 $\int_{-\infty}^{\infty}$ 

Authentication: 202198409

Date: 02-04-19