

M190000009283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

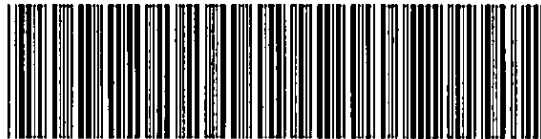
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 SEP 25 PM 4:15

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B KINSEY
SEP 26 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2019

STU WARREN
341 COOL SPRINGS BLVD., STE 450
FRANKLIN, TN 37067

SUBJECT: OCALA G1 RESEARCH, LLC
Ref. Number: W19000083306

We have received your document for OCALA G1 RESEARCH, 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):

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.

Attached

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.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 219A00018988

RECEIVED
SEP 25 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocala GI Research, 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:

Stu Warren

Name of Person

ObjectiveGI, Inc.

Firm/Company

341 Cool Springs Blvd., Ste. 450

Address

Franklin, TN 37067

City/State and Zip Code

Stu.Warren@objectivegi.com

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

For further information concerning this matter, please call:

Jennifer Nolan, Paralegal

at (615) 664-5306

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

2019 SEP 25 PM 4: 15

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. Ocala GI Research, L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

2. Tennessee 3. 84-2816953
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 1740 SE 18th Ave 6. 341 Cool Springs Blvd.
(Street Address of Principal Office) (Mailing Address)
Unit 801 Suite 450
Ocala, FL 34471 Franklin, TN 37067

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

Name: Cogeney Global Inc.
Office Address: 115 North Calhoun Street, Suite 4
Tallahassee 32301
(City) , Florida (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.

Judi Grant

(Registered agent's signature)

2019 SEP 25 PM 4:15

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title or Capacity: **Name and Address:**

☐ Manager Name: ObjectiveGI, Inc.

☒ Member Address: 341 Cool Springs Blvd, Ste 450

☐ Authorized Franklin, TN 37067

Person Colleen Hoke, CEO

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: GAO Research PLLC

☒ Member Address: 1740 SE 18th Ave, Unit 801

☐ Authorized Ocala, FL 34471

Person Ashwin Rumalla, MD, Mang. Partner

☐ Other ☐ Other

☒ Manager Name: Stu Warren, CFO

☐ Member Address: 341 Cool Springs Blvd

☐ Authorized Suite 450

Person Franklin TN 37067

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

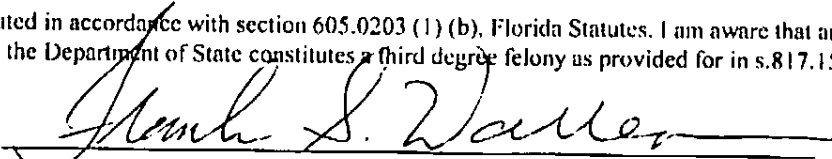
Person _____

☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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
 Franklin (Stu) Warren
 Typed or printed name of signer



Tre Hargett
Secretary of State

**Division of Business Services
Department of State**

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

NELSON MULLINS RILEY & SCARBOROUGH LLP
BRADLEY SAYLES
STE. 1100
150 4TH AVE. N.
NASHVILLE, TN 37219

September 3, 2019

Request Type: Certificate of Existence/Authorization
Request #: 0328638

Issuance Date: 09/03/2019
Copies Requested: 1

Document Receipt

Receipt #: 004999846 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3764928405 \$20.00

Regarding: Ocala GI Research, LLC

Filing Type: Limited Liability Company - Domestic

Formation/Qualification Date: 08/23/2019

Status: Active

Duration Term: Perpetual

Business County: WILLIAMSON COUNTY

Control #: 1047467

Date Formed: 08/23/2019

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Ocala GI Research, LLC

* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;

* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;

* has appointed a registered agent and registered office in this State;

* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Cert Web User

Verification #: 034938837