

M19000009932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

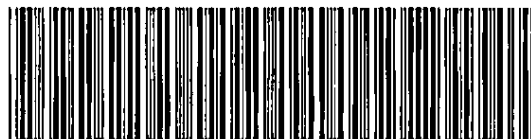
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/02/19--01020--010 **125.00

FILED
2019 OCT -2 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10-18-19



Connecting Disconnected Data*

October 1, 2019

Via FEDEX

Florida Secretary of State
Division of Corporation – Registration Building
2661 Executive Center Circle
Tallahassee, FL 32301

To whom it may concern:

Please find enclosed an Application of a Foreign LLC Company for Authorization to Transact Business in the State of Florida ("Application"). Included with the Application are the following items:

- Certificate of Existence from The White Stone Group, LLC's domicile State of Tennessee showing in good standing;
- Check in the amount of \$125.00; and
- Duplicate Application for acknowledgement of the filing with a return self-addressed FedEx envelope.

Should you have any question regarding this filing, please contact me at (678)710-9906.

Thank you,

A handwritten signature in black ink, appearing to read 'Shannon Weinberg', is written over a large, loopy, oval-shaped scribble.

Shannon Weinberg
Paralegal
(678) 710-9906

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2019 OCT -2 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

865 292 0660

100 Ashford Center North, Suite 300
Dunwoody, GA 30338

vynemedical.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: The White Stone Group, 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:

Shannon Weinberg

Name of Person

Vyne

Firm/Company

100 Ashford Center North, Suite 300

Address

Dunwoody, GA 30038

City/State and Zip Code

shannon.weinberg@vynecorp.com

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

For further information concerning this matter, please call:

Shannon Weinberg

678

710.9906

at (_____) _____

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

2018 OCT -2 AM 10:49
CLERK
TALLAHASSEE, FLORIDA
SECRETARY 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. The White Stone Group, LLC

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

The White Stone Group (Vyne Medical), 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

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

3.

(FEI number, if applicable)

4. Upon Date of Qualification

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability.)

5. 100 Ashford Center North

(Street Address of Principal Office)

6. 100 Ashford Center North

(Mailing Address)

Suite 300

Suite 300

Dunwoody, GA 30338

Dunwoody, GA 300338

7. 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

(City)

Florida 33324

(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.

Denise Bell

(Registered agent's signature)

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2018 OCT -2 AM 10:50
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: Melinda Benton

☒ Member Address: 100 Ashford Center North

☐ Authorized Suite 300

Person Dunwoody, GA 30338

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

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

☐ 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.

 9/30/19
Signature of an authorized person

Claudia Stein-Martin, Chief Financial Officer

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

CLAUDIA STEIN-MARTIN
CLAUDIA STEIN-MARTIN
STE 300
100 ASHFORD CENTER NORTH
DUNWOODY, GA 30338

August 21, 2019

Request Type: Certificate of Existence/Authorization
Request #: 0327172

Issuance Date: 08/21/2019
Copies Requested: 1

Document Receipt

Receipt #: 004981288 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3764197763 \$20.00

Regarding:	The White Stone Group, LLC	Control #:	386636
Filing Type:	Limited Liability Company - Domestic	Date Formed:	03/21/2000
Formation/Qualification Date:	03/21/2000	Formation Locale:	TENNESSEE
Status:	Active	Inactive Date:	
Duration Term:	Perpetual		
Business County:			

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

The White Stone Group, 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 filed the most recent annual report required with this office;
- * 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 #: 034749230