

M200000004244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

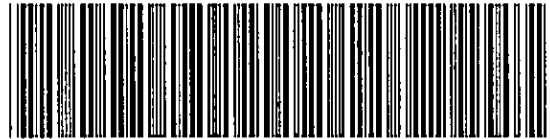
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

5/5/20 Received Cert. of Fact LLC

5/5/20
WDC

Office Use Only



300343252303

04/24/20--01019--019 **130.00

FILED
20 MAY -5 AM 4:11
CLERK OF COURT
DISTRICT OF COLUMBIA

EP Critical Care, LLC

April 22, 2020

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: EP Critical Care, LLC Florida Registration as Foreign LLC

Please see attached application for registration in Florida as a foreign limited liability company. Also enclosed is our filing fee, along with our Texas Franchise Tax Account Status and Certificate of Filing with the Office of the Secretary of State with the State of Texas.

Respectfully,



Mark W. Sanderson, CPA
EP Critical Care, LLC
214-298-8785

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: EP CRITICAL CARE 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:

MARK W SANDERSON

Name of Person

C/O HBP MANAGEMENT

Firm/Company

4475 TRINITY MILLS RD #703064

Address

DALLAS, TEXAS 75370

City/State and Zip Code

MSANDERSON@HRM-LLC.COM

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

For further information concerning this matter, please call:

DAWN EATON

972

248-9090

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

FILED
20 MAY -5 AM 4:11
TALLAHASSEE, FL

**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. EP CRITICAL CARE LLC
(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. TEXAS 3. 85-0761829
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. APRIL 17, 2020
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

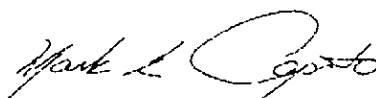
5. 17440 DALLAS PKWY STE 139 6. 4475 TRINITY MILLS RD #703064
(Street Address of Principal Office) (Mailing Address)
DALLAS, TEXAS 75287 DALLAS, TEXAS 75370

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

Name: MARK E CAPUTO
Office Address: 101 East Camino Real, PH 11
Boca Raton, Florida 33432
(City) (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.


(Registered agent's signature)

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: MARK E CAPUTO

☒ Member Address: 101 East Camino Real, PH 11

☐ Authorized Boca Raton, FL 33432

Person _____

☐ Other _____ ☐ Other _____

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

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: MARK W SANDERSON

☐ Member Address: 11727 HIGH FOREST DR

☐ Authorized DALLAS, TEXAS 75230

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

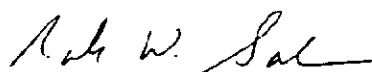
Person _____

☐ 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

Mark W. Sanderson

Typed or printed name of signer



Office of the Secretary of State

CERTIFICATE OF FILING OF

EP Critical Care LLC
File Number: 803595624

The undersigned, as Secretary of State of Texas, hereby certifies that a Certificate of Formation for the above named Domestic Limited Liability Company (LLC) has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

The issuance of this certificate does not authorize the use of a name in this state in violation of the rights of another under the federal Trademark Act of 1946, the Texas trademark law, the Assumed Business or Professional Name Act, or the common law.

Dated: 04/17/2020

Effective: 04/17/2020



A handwritten signature in black ink, appearing to read "Ruth R. Hughs".

Ruth R. Hughs
Secretary of State



Franchise Tax Account Status

As of : 04/22/2020 15:22:45

This page is valid for most business transactions but is not sufficient for filings with the Secretary of State

EP CRITICAL CARE LLC

Texas Taxpayer Number 32073989272

Mailing Address 17440 DALLAS PKWY STE 139 DALLAS, TX
75287-7307

Right to Transact Business in Texas ACTIVE

State of Formation TX

Effective SOS Registration Date 04/17/2020

Texas SOS File Number 0803595624

Registered Agent Name HBP MANAGEMENT SERVICES, LLC

Registered Office Street Address 17440 DALLAS PARKWAY SUITE 139 DALLAS, TX
75284



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2020

MARK W SANDERSON
C/O HBP MANAGEMENT
4475 TRINITY MILLS RD #703064
DALLAS, TX 75370 US

SUBJECT: EP CRITICAL CARE LLC
Ref. Number: W20000042336

We have received your document for EP CRITICAL CARE LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Laura D Chang
Regulatory Specialist II

Letter Number: 220A00008834

5/5/20 Received Cert. of ^{Fact} ~~Good Standing~~ UDC

EP Critical Care, LLC

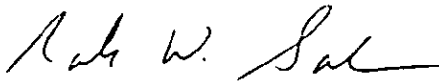
April 30, 2020

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: EP Critical Care, LLC Florida Registration as Foreign LLC – TX Certificate of Fact

Please see attached requested Certificate of Fact from the Secretary of State of Texas to accompany our application for registration in Florida as a foreign limited liability company. Also enclosed is a copy of our check for the filing fee was provided with our original submittal which has already been cashed, along with our Texas Franchise Tax Account Status and Certificate of Filing with the Office of the Secretary of State with the State of Texas.

Respectfully,



Mark W. Sanderson, CPA
EP Critical Care, LLC
214-298-8785

RECEIVED
MAY 01 2020



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for EP Critical Care LLC (file number 803595624), a Domestic Limited Liability Company (LLC), was filed in this office on April 17, 2020.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 30, 2020.



A handwritten signature in black ink, appearing to read "Ruth R. Hughes".

Ruth R. Hughes
Secretary of State