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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 643592 8288814 AUTHORIZATION COST LIMIT : '\$' 125.00 ORDER DATE: February 1, 2021 ORDER TIME : 11:20 AM ORDER NO. : 643592-080 CUSTOMER NO: 8288814 FOREIGN FILINGS NAME: C & A INDUSTRIES, LLC XXXX QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_ CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT# 61594

# 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:

	Limited Liability Company; must include "Limited	Liability Company," "L.C.C.," or "ELC.")	
une unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flori	ida. The alternate name must include "Limited Liability Company,"	""L.L.C," or "LLC
1E		47-0592910 3	
(Jurisdiction under the law of w	nich foreign limited liability company is organized)	(FEI number, if applicable	
Upon filing			
	(Date first transacted business in Florida, if prior to n (See sections 605 0904 & 605 0905, F.S. to determin	egistration ) ne penalty liabihty)	
13609 California Street		13609 California Street	
(Street Address of Principal Office)		6. (Mailing Address)	
Omaha, NE 68154-5233		Omaha, NE 68154-5233	
			<del></del>
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
	Corporation Society Company		
Name:	Corporation Service Company	<del></del>	" <i>"</i>
055 441	1201 Hays Street		2 <u>2</u> 2 <u>1</u>
Office Address.			
Office Address:		22204	Ţ.,
Office Address:	Tallahassee	32301 , Florida	Ęr

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: \_ Daniel Shedivy Name: Craig Meier X Manager Address: \_\_\_\_ 13609 California Street Member Member Address: Omaha, NE 68154-5233 Omaha, NE 68154-5233 Authorized Authorized Person Person Other\_\_\_\_\_ Other\_\_\_\_\_ Other\_ Other Name: Medical Solutions LLC Name: \_\_\_\_ Manager Manager Address: \_\_\_\_\_ 1010 N 102nd Street Member X Member Omaha, NE 68114 Authorized Authorized Person Person Other\_ Other\_\_\_\_ Other\_\_ Other Manager Name: \_ Name: \_\_\_\_\_ Manager Member Address: \_\_\_\_\_ Member Authorized Authorized Person Person Other\_\_\_\_ Other Other\_\_ Other\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Daniel Shedivy

Typed or printed name of signee

## STATE OF NEBRASKA

United States of America, State of Nebraska

} ss.

Secretary of State State Capitol Lincoln, Nebraska

I, Robert B. Evnen, Secretary of State of the State of Nebraska, do hereby certify that

#### C & A INDUSTRIES, LLC

was duly formed under the laws of Nebraska on June 8, 1977;

all fees, taxes, and penalties due under the Nebraska Uniform Limited Liability Company Act or other law to the Secretary of State have been paid;

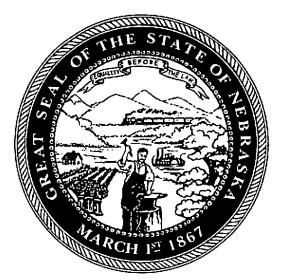
the Company's most recent biennial report required by section 21-125 has been filed by the Secretary of State;

the Secretary of State has not administratively dissolved the company; the Company has not delivered to the Secretary of State for filing a Statement of Dissolution;

a Statement of Termination has not been filed by the Secretary of State.

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

In Testimony Whereof,



I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on this date of

February 5, 2021

Secretary of State