

**M210000014688**

Division of Corporations

Page 1 of 2

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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2021 NOV -4 PM 4:23

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To: Division of Corporations  
Fax Number : (850) 617-6383

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

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Foreign Limited Liability Company  
CRCB GP, LLC

**\*\*\*PLEASE PROVIDE THE ORIGINAL SUBMISSION DATE OF 11/3/21\*\*\***

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$155.00

S. ROBERTS

NOV 04 2021



November 4, 2021

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CAPITOL SERVICES, INC.

SUBJECT: CRCB GP, LLC  
REF: W21000144305

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.

Please provide the correct FEI/EIN in section 3 as well as the proper name of the entity on the fax cover sheet.

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

STANTON E ROBERTS  
Regulatory Specialist II

FAX Aud. #: H21000408497  
Letter Number: 221A00026967

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CRCH GP, 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:

Leonel Carrillo

Name of Person

Winstead PC

Firm/Company

401 Congress Ave., Ste. 2100

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Address

Austin, TX 78701

City/State and Zip Code

lcarrillo@winstead.com

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

For further information concerning this matter, please call:

Leonel Carrillo

512

370-2936

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

**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. CRCH GP, 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. Texas

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

3. 82-2342757

(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)

8637 Fredericksburg Road, Ste. 360

5. \_\_\_\_\_  
(Street Address of Principal Office)

San Antonio, TX 78240

8637 Fredericksburg Road, Ste. 360

6. \_\_\_\_\_  
(Mailing Address)

San Antonio, TX 78240

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

Name: Charles J. Roach

Office Address: 15 Sunset Ln.

Pompano Beach

(City)

, Florida 33062

(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.

C. J. Roach

C. J. Roach (Nov 3, 2021 12:38 CDT)

(Registered agent's signature)

FILE  
2021 NOV -3 PM  
TALLAHASSEE

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: Carlos O. Hernandez, M.D.

☐ Member Address: 8637 Fredericksburg Rd.

☐ Authorized Suite 360

Person San Antonio, TX 78240

☐ Other ☐ Other

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

☒ Manager Name: Richard J. Whittaker, M.D.

☐ Member Address: 8637 Fredericksburg Rd.

☐ Authorized Suite 360

Person San Antonio, TX 78240

☐ Other ☐ Other

☒ Manager Name: Charles J. Roach

☐ Member Address: 8637 Fredericksburg Rd.

☐ Authorized Suite 360

Person San Antonio, TX 78240

☐ Other ☐ Other

☒ Manager Name: Bruce Begia

☐ Member Address: 8637 Fredericksburg Rd.

☐ Authorized Suite 360

Person San Antonio, TX 78240

☐ 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.

C. J. Roach  
C. J. Roach (Nov 3, 2021 12:36 CDT)

Signature of an authorized person

Charles J. Roach

Typed or printed name of signer

Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



H21000408497 3  
John B. Scott  
Secretary of State

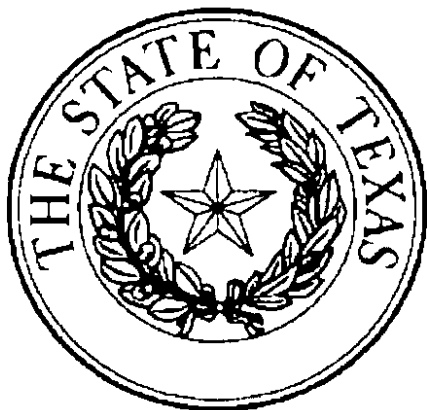
## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CRCB GP, LLC (file number 802776486), a Domestic Limited Liability Company (LLC), was filed in this office on July 25, 2017.

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 November 03, 2021.



A handwritten signature in black ink, appearing to read "John B. Scott".

John B. Scott  
Secretary of State