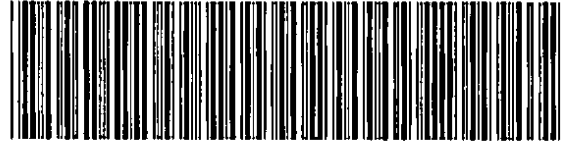


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JUL 14 2022

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(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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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VELOCITY CLINICAL SERVICES, 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:

Shawn D. Twing
Name of Person
Mullin Hoard Brown LLP
Firm/Company
500 S. Taylor, Suite 800
Address
Amarillo, Texas 79120
City/State and Zip Code
stwing@mhba.com
E-mail address: (to be used for future annual report notification)

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2022 JUL -5 PM 8:01
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

Todd Royal at (806) 438-2006
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:

- \$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. VELOCITY CLINICAL SERVICES, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Velocity Clincial Services - FLA, a Texas sub-series Limited Liability Company

(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. 88-1742878 (FEI number, if applicable)

4. None prior to this filing (Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 5005 Lexington Square (Street Address of Principal Office) 6. Same as Street Address (Mailing Address)

Amarillo, Texas 79119

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

Name: Capitol Corporate Services, Inc.

Office Address: 515 E Park Ave., 2nd Fl.

Tallahassee, Florida 32301 (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.

Mary Fink, Mary Fink, Asst. Sec. on behalf of Capitol Corporate Services, Inc. (Registered agent's signature)

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8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Managing Member

John Bradford Jr

5005 Lexington Square

Amarillo Texas 79119

Managing Member

Todd Royal

5005 Lexington Square

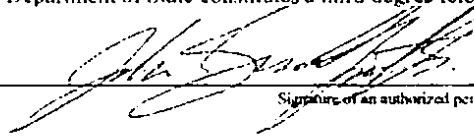
Amarillo Texas 79119

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DEPARTMENT OF STATE
TALLAHASSEE, FL

(Use attachments if necessary)

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

John Bradford, Jr.

Typed or printed name of signee



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 Velocity Clinical Services, LLC (file number 804499988), a Domestic Limited Liability Company (LLC), was filed in this office on March 31, 2022.

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 June 22, 2022.

FILED
2022 JUN 22 8:02
SECRETARY OF STATE
AUSTIN, TEXAS



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

John B. Scott
Secretary of State