

M23 000002735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

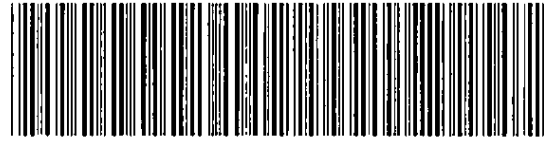
(Document Number)

Copies _____

Certificates of Status _____

el Instructions to Filing Officer

Office Use Only



900403628179

2023 MAR -1 PM 4: 24
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CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

2023 MAR -1 PM 4: 24

2023 MAR -1 PM 3: 30

RECEIVED
AND
FILED

MAR 04 2023
K. Brumbloy

W23-28677

on



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 2, 2023

COGENCY GLOBAL

SUBJECT: MORCARE LLC
Ref. Number: W23000028677

We have received your document for MORCARE LLC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

STANTON H ROBERTS
Regulatory Specialist III

Letter Number: 123A00004954

RECEIVED
2023 MAR -3 AM 4:10
ALLIANCE



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 03/01/2023

Name: Jennifer Bialowas


Reference #: 1919712

Entity Name: MORCARE LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other Upon filing please provide a certified copy

*Please retain original
submission date (3/1)*

Authorized Amount: 793.75

Signature: 

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. MORCARE, 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. ILLINOIS (Jurisdiction under the law of which foreign limited liability company is organized) 3. 81-1003431 (FEI number, if applicable)

4. 1/1/2022 (Date first transacted business in Florida, if prior to registration. (See sections 605.0901 & 605.0905, F.S. to determine penalty liability))

5. 117 N. Jefferson St. Ste 203 (Street Address of Principal Office) Chicago, IL 60661

6. 1 Antares Drive, Ste 400 (Mailing Address) Ottawa, ON K2E 8C4 CAN

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

Name: Cogency Global Inc.

Office Address: 115 North Calhoun St. Suite 4

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.

(Registered agent's signature) Karen McKeown - Assistant Secretary

2023 MAR - 1 PM 3:30 APPROVED AND FILED

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: Jeff Bender

Member Address: 1 Antares Drive, Ste 400

Authorized Ottawa, ON K2E 8C4

Person _____

Other _____ Other _____

Title or Capacity: Name and Address:

Manager Name: Todd Richardson

Member Address: 1 Antares Drive, Ste 400

Authorized Ottawa, ON K2E 8C4

Person _____

Other _____ Other _____

Manager Name: Amanda Neale

Member Address: 1 Antares Drive, Ste 400

Authorized Ottawa, ON K2E 8C4

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

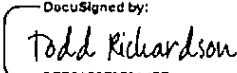
Person _____

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.

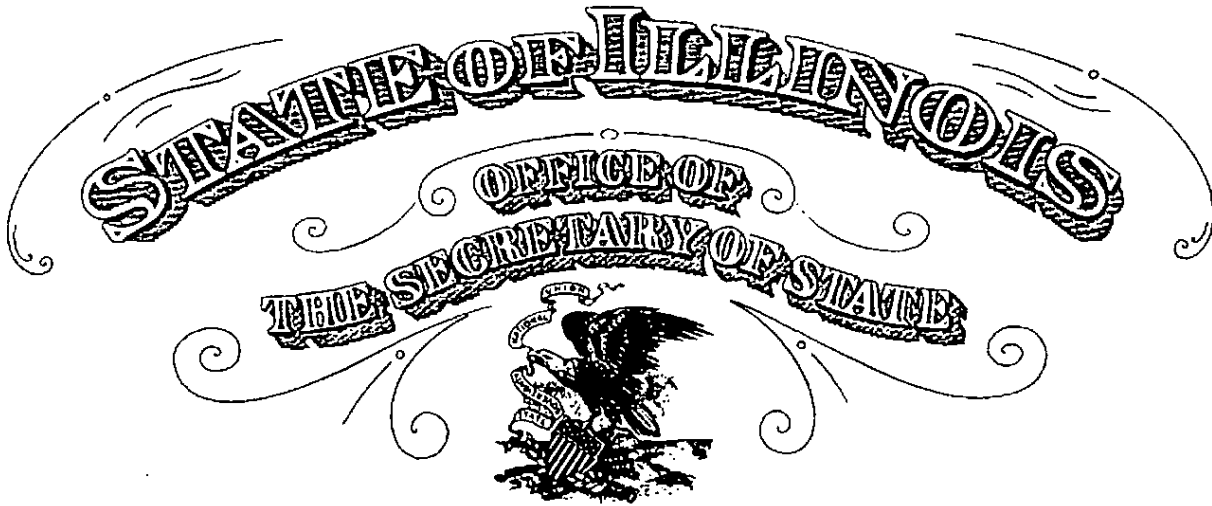
DocuSigned by:

 BEE8A38E373A4FF
 Signature of an authorized person

Todd Richardson, Secretary

Typed or printed name of signer

File Number

0554471-8



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulis, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

MORCARE, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 16, 2015, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 23RD day of FEBRUARY A.D. 2023 .