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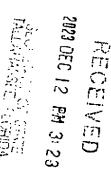
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12/12/2023

Date:

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Name:	MFCC Equity HoldCo, LLC				
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COVER LETTER

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TO:	Registration Section Division of Corporations					
SUBJI	MFCC Equity HoldCo, LLC	0				
		Name of Limited Liability Company				
		mited Liability Company for Authorization to Transact Business in Florida," Certificate of gister the above referenced foreign limited liability company to transact business in Florida.				
Please	return all correspondence concerni	ing this matter to the following:				
	Brianna Volkmann					
		Name of Person				
	Husch Blackwell LLP					
	**-	Firm/Company				
	511 North Broadway, S	Suite 1100				
	Address					
	Milwaukee, WI 53202					
		City/State and Zip Code				
	n_sharma94@yahoo.con	1				
	E-mai	l address: (to be used for future annual report notification)				
For fur	ther information concerning this m	natter, please call:				
Brianna Volkmann		414 978-5326 at ()				
	Name of Conta					
Mailing Address:		Street Address:				
Registration Section		Registration Section Division of Corporations				
Division of Corporations P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				
1 ananassec. 1 L 32314		Tallahassee, FL 32303				
		wing amount: FLORIDA DEPARTMENT OF STATE 30.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy				

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Fi	onda. The alte	rnate name must include "Limited Liability Co	ompany," "L L C," or '
Delaware (Jurisdiction under the law of which foreign limited hability company is organized)		9.	-3619562 (FEI number, if applicable)	
		ے		
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine	registration.) ine penalty liab	odity)	
2776 Enterprise Road		6. (Mailing Address)		
reet Address of Principal Office)		o	(Mailing Address)	
Suite 100		Su	nite 100	,
Orange City, FL 32763	i.	От	range City, FL 32763	,
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acc	eptable)	ھ،
Name:	Neeraj Sharma, M.D.			_
Office Address:	2776 Enterprise Road, Suite 100			
	Orange City (City)		32763 . Florida	
	(Civ.)		(Zip code)	

(Registered agent's signature)

■Manager Name: Gregory L. Ortega, M.D. ■Manager Name: Neeraj Sharma, M.D. ■Member Address: 2776 Enterprise Road ■Member Address: 2776 Enterprise Road □Authorized Orange City, Fl. 32763 Person Orange City, Fl. 32763 □Other □Other Person Orange City, Fl. 32763 ■Manager Name: Santosh M. Nair, M.D. ■Member Address: 2776 Enterprise Road ■Member Address: 2776 Enterprise Road □Authorized Suite 100 □Authorized Person Orange City, Fl. 32763 □Other □Other Orange City, Fl. 32763 □Other □Other Other □Manager Name: □Other □Manager Name: □Other □Member Address: □Other □Member Address: □Other □Member Address: □Other □Member Address: □Other □Authorized □Authorized □Authorized □Person □Other □Other □O	8. For initial index manage [up to six (ing purposes, list names, title or capacity an 6) total]:	d addresses of the primary n	iembers/managers or persons authorized to
Member Address: 2776 Enterprise Road Member Address: 2776 Enterprise Road Address: 2776 Enterprise Road Authorized Suite 100 Authorized Orange City, FL 32763 Person Orange City, FL 32763 Person Orange City, FL 32763 Other Othe	Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Member Address: 2776 Enterprise Road Member Address: 2776 Enterprise Road Member Address: 2776 Enterprise Road Member Address: Cother Member Membe	■Manager	Name: Gregory L. Ortega, M.D.	■Manager	Name: Neeraj Sharma, M.D.
Date	■Member	Address: 2776 Enterprise Road	■Member	Address: 2776 Enterprise Road
Person Orange City, FL 32763 Person Orange City, FL 32763 Other Vice President Other Other Other President Other	□Authorized	Suite 100	□Authorized	Suite 100
Other Vice President				Orange City, FL 32763
Member Address: 2776 Enterprise Road Member Address: 2776 Enterprise Road Authorized Suite 100 Authorized Person Orange City, Fl. 32763 Person Orange City, Fl. 32763 Person Orange City, Fl. 32763 Person Other O	Vice Presid	lent Other	· · ·	□Other
Authorized Person Orange City. Ft. 32763 Person Orange City. Ft. 32763 Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other	■Manager	Name: Rene Cabeza, M.D.	■Manager	Name: Santosh M. Nair, M.D.
Authorized Person Orange City, Ft. 32763 Person Orange City, Ft. 32763 Other Treasurer Other Other Other Other Other Manager Name: Member Address: Member Address: Member Address: Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other Other	≣Member	Address: 2776 Enterprise Road	■Member	Address: 2776 Enterprise Road
Person Other Secretary Other Treasurer Other Vice President Other Other Other Manager Name: Member Address: Member Address: Authorized Person Person Person Other Other Other Other Other Other Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate un 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 inform submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	□Authorized		□Authorized	Suite 100
Other	Person	Orange City, Ft. 32763	Person	Orange City, FL 32763
Member Address:	■Other_Secretary	Treasurer	■Other	ent Other
Member Address: Member Address: Authorized Authorized Person Person Other Ot				
Person Dother Dother Dother Dother	□Manager	Name:	□Manager	Name:
Person Other Other Other Other Other Other Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only, 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 record jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate un 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 inform submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	□Member	Address:	□Member	Address:
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only, 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 record jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate un 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 inform submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	□Authorized		□Authorized	
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Signature of an authorized person		Signa	sture of an authorized person	

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MFCC EQUITY HOLDCO, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWELFTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 204792270

Date: 12-12-23

2414090 8300 SR# 20234200769