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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
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19 AUG 29 PM 7:30
TALLAHASSEE, FLORIDA

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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RECEIVED
19 AUG 29 PM 2:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
SENTINEL MEDICAL TECHNOLOGIES, LLC

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

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SENTINEL MEDICAL TECHNOLOGIES, 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:

Cheyenne Moseley
Name of Person
Legalzoom.com, Inc.
Firm/Company
101 N Brand Blvd 11th Fl
Address
Glendale, CA 91203
City/State and Zip Code
lross@sentinelmedtech.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheyenne Moseley at (800) 773-0888
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:
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. SENTINEL MEDICAL TECHNOLOGIES, 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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 823481484
(FEI number, if applicable)

4. 07/1/19
(Date first transacted business in Florida, if prior to registration. See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 50 N. Laura St., Ste. 2500
Jacksonville, Florida 32202
(Street Address of Principal Office)

6. 50 N. Laura St., Ste. 2500
Jacksonville, Florida 32202
(Mailing Address)

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

Name: United States Corporation Agents, Inc.
Office Address: 5575 S. Semoran Blvd., Suite 36
Orlando, Florida 32822
(City) (Zip code)

19 AUG 29 PM 7:35
FILED

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.

Cheyenne Moseley signature
CHEYENNE MOSELEY, ASSISTANT SECRETARY, UNITED STATES CORPORATION AGENTS, INC.

19 AUG 29 PM 7:35
STATE OF FLORIDA

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: RT Holding Enterprises, LLC

Member Address: 872 NE 35th St

Authorized Boca Raton, FL 33421

Person _____

Other _____ Other _____

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

Manager Name: CTX Enterprises, LLC

Member Address: 872 NE 35th St

Authorized Boca Raton, FL 33421

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 _____

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.

Signature of an authorized person

Russell Lalli, manager signing on the behalf of RT Holding Enterprises, LLC

Typed or printed name of signee

Delaware

Page.1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENTINEL MEDICAL TECHNOLOGIES, 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 TWENTY-FIRST DAY OF AUGUST, A. D. 2019..

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SENTINEL MEDICAL TECHNOLOGIES, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF NOVEMBER, A. D. 2017.

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

FILED
19 AUG 29 PM 7:35
TALLAHASSEE, FLORIDA



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

6626536 8300

SR# 20196644247

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203450826

Date: 08-21-19