

F15000003652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

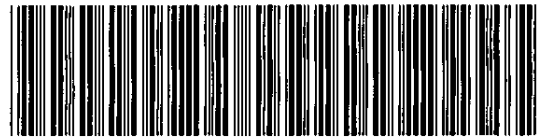
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LW15-54752 PC suffix

Office Use Only



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2015 AUG 13 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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15 AUG 13 AM 10:58
DIVISION OF CORPORATIONS

RECEIVED

K. SALY
EXAMINER
AUG 20 2015

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 744398 7678797
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 70.00

ORDER DATE : August 12, 2015
ORDER TIME : 5:26 PM
ORDER NO. : 744398-015
CUSTOMER NO: 7678797

FOREIGN FILINGS

NAME: PALADINA HEALTH MEDICAL GROUP,
PC

XXXX QUALIFICATION (TYPE: PC)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2015

CSC / COURTNEY WILLIAMS

RESUBMIT
Please give original
submission date as file date.

SUBJECT: PALADINA HEALTH MEDICAL GROUP, PC
Ref. Number: W15000054752

We have received your document for PALADINA HEALTH MEDICAL GROUP, PC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the recognition of a foreign professional corporation. An acceptable corporate suffix will need to be added to your entity name for this Department to accept and file your document.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 615A00017170

RECEIVED
DEPARTMENT OF STATE
15 AUG 19 PM 1:56
TO AGENCY FILE
SUFFICIENCY OF FILING

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Paladina Health Medical Group, PC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
Paladina Health Medical Group, PC Corp.
(if name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Colorado 3. 47-4457198
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5/16/2013 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. 7/31/2015
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1551 Wewatta Street, Denver, CO 80202
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

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9. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation 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.

Corporation Service Company
By: [Signature] Courtney Williams
(Registered agent's signature) Asst. Vice President

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Jennifer Bajaj, M.D.
Address: 1551 Wewatta Street
Denver, CO 80202

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Jennifer Bajaj, M.D.
Address: 1551 Wewatta Street
Denver, CO 80202

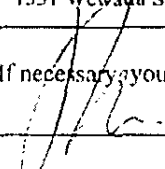
Vice President: _____
Address: _____

Secretary: Jennifer Bajaj, M.D.
Address: 1551 Wewatta Street, Denver, CO 80202

Treasurer: Jennifer Bajaj, M.D.
Address: 1551 Wewatta Street, Denver, CO 80202

NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.

Jennifer Bajaj, M.D., President, Treasurer & Secretary

12.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. Jennifer Bajaj, M.D., President, Treasurer and Secretary
(Typed or printed name and capacity of person signing application)

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

PALADINA HEALTH MEDICAL GROUP, PC

is a **Corporation** formed or registered on 05/16/2013 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20131294633.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/11/2015 that have been posted, and by documents delivered to this office electronically through 08/12/2015 @ 16:14:32.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 08/12/2015 @ 16:14:32 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 9275012.



Secretary of State of the State of Colorado

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click Business Center and select "Frequently Asked Questions"