



**Secretary of State**  
**Statement and Designation by**  
**Foreign Corporation**

S&amp;DC-S/N

For Office Use Only

**-FILED-**

File No.: 6386175

Date Filed: 9/13/2024

Must be submitted with a current **Certificate of Good Standing** issued by the government agency where the corporation was formed.

Filing Fee – \$100.00 (for a foreign stock corporation) or  
 \$30.00 (for a foreign nonprofit corporation)



Certified Copy Fee (Optional) - \$5.00

Note: Corporations may have to pay minimum \$800 tax to the California Franchise Tax Board each year. For more information, go to  
<https://www.ftb.ca.gov/>.

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1. **Corporate Name** (Go to [www.sos.ca.gov/business/be/name-reservations](http://www.sos.ca.gov/business/be/name-reservations) for general corporate name requirements and restrictions.)

2. **Jurisdiction** (State, foreign country or place where this corporation is formed - must match the Certificate of Good Standing provided.)

Friedman Physician Consulting, P.C., which will do business in California as Friedman Physician Consulting, Inc.

New Jersey

3. **Business Addresses** (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)

a. Initial Street Address of Principal Executive Office - <b>Do not enter a P.O. Box</b>	City (no abbreviations)	State	Zip Code
210 Summerhouse Lane	Sandy Springs	GA	30350
b. Street Address of Principal Office in California, if any - <b>Do not enter a P.O. Box</b>	City (no abbreviations)	State	Zip Code
		CA	
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code

4. **Service of Process** (Must provide either Individual OR Corporation.)

**INDIVIDUAL** – Complete Items 4a and 4b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is <b>not</b> a corporation)	Middle Name	Last Name	Suffix
b. Street Address (if agent is <b>not</b> a corporation) - <b>Do not enter a P.O. Box</b>	City (no abbreviations)	State	Zip Code
		CA	

**CORPORATION** – Complete Item 4c. Only include the name of the registered agent Corporation.

- c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 4a or 4b

Cogency Global Inc.

5. **Read and Sign Below** (Office or title not required.)

I am a corporate officer and am authorized to sign on behalf of the foreign corporation.

13 Sept. 2024

Signature

Kevin Friedman, DO

Type or Print Name

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING

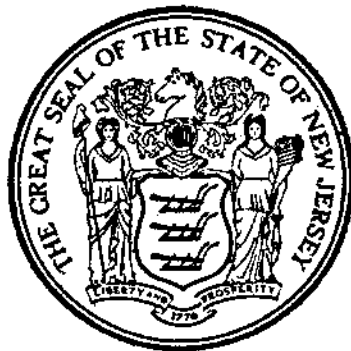
FRIEDMAN PHYSICIAN CONSULTING, P.C.  
0101065204

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Professional Corporation was registered by this office on August 30, 2024.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

COGENCY GLOBAL INC  
316 BERRHILL DRIVE  
WILLIAMSTOWN, NJ 08094



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
5th day of September, 2024

Elizabeth Maher Muoio  
State Treasurer

Certificate Number : 6156818516

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)