

S&DC-S/N **Secretary of State**

Statement and Designation by Foreign Corporation

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.itb.ca.gov/.

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File No.: 6419943 Date Filed: 10/2/2024

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 Corporate Name (Go to www.sos.ca.gov/business/be/name-reservations for general corporate name requirements and restrictions.)

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

CARBON HEALTH MEDICAL GROUPOF FLORIDA, P.A. which will do business in California as CARBON HEALTH

FLORIDA

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 - Bo not enter a P.O. Box	City (no abbreviations)	State	Zip Code
2100 FRANKLIN STREET, SUITE 355	OAKLAND	CA	94612
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Bo	City (no abbreviations)	State	Zip Code
2100 FRANKLIN STREET, SUITE 355	OAKLAND	CA	94612
c. Mailing Address of Principal Executive Office, if different than item 3s	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 not a corporation)	Middle Name	Last Name			Suffix
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b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)		State	Zip Code	ĺ
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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

TELOS LEGAL CORP.

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.

SUJAL MANDAVIA

Type or Print Name

Signature

Print Form Clear Form

State of Florida Department of State

I certify from the records of this office that CARBON HEALTH MEDICAL GROUP OF FLORIDA, P.A. is a corporation organized under the laws of the State of Florida, filed on May 14, 2020.

The document number of this corporation is P20000035663.

I further certify that said corporation has paid all fees due this office through December 31, 2024, that its most recent annual report/uniform business report was filed on April 1, 2024, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Second day of October, 2024



Secretary of State

Tracking Number: 3970249170CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication