

F25000001062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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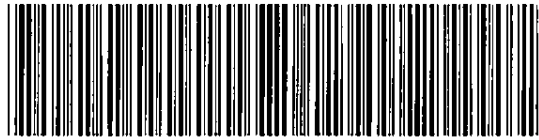
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Rebel Health Medical Services, P.A.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Eric Stewart Britain

Name of Person

Rebel Health Medical Services, P.A.

Firm/Company

7901 4th St N STE 300

Address

St. Petersburg, FL 33702

City/State and Zip code

ebrittain@bsehealthpartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Stewart Britain

at (914) 275-0661

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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. Rebel Health Medical Services, P.A., CORP
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 33-2600351
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. December 20, 2024 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1440 N Edgewood St. Floor 4 Arlington VA 22201
(Principal office street address)

(Current mailing address, if different)

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

Name: Northwest Registered Agent LLC
Office Address: 7901 4th St N STE 300
St. Petersburg, Florida 33702
(City) (Zip code)

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.



(Registered agent's signature)

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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

FILED
2025 FEB 12 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FL

A. DIRECTORS

☐Chairman Name: Eric Stewart Brittain
☐Vice Chairman Address: _____
☐Director 1440 N Edgewood St. Floor 4
☒President Arlington VA 22201
☐Vice President _____
☐Secretary ☐Treasurer
☐Other _____ ☐Other _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other _____ ☐Other _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other _____ ☐Other _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other _____ ☐Other _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐Other _____ ☐Other _____

☐Chairman Name: _____
☐Vice Chairman Address: _____
☐Director _____
☐President _____
☐Vice President _____
☐Secretary ☐Treasurer
☐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.

12. Eric Brittain
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. Eric Stewart Brittain / President
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF INCORPORATION OF "REBEL HEALTH
MEDICAL SERVICES, P.A.", FILED IN THIS OFFICE ON THE TWENTIETH
DAY OF DECEMBER, A.D. 2024, AT 1:53 O'CLOCK P.M.



10045288 8100
SR# 20244583921

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 205210964
Date: 12-23-24

STATE OF DELAWARE
CERTIFICATE OF INCORPORATION
A STOCK CORPORATION

The undersigned Incorporator, desiring to form a corporation under pursuant to the General Corporation Law of the State of Delaware, hereby certifies as follows:

1. The name of the Corporation is Rebel Health Medical Services, P.A.
2. The Registered Office of the corporation in the State of Delaware is located at 8 The Green STE B (street),
in the City of Dover, County of Kent
Zip Code 19901. The name of the Registered Agent at such address upon
whom process against this corporation may be served is Northwest Registered Agent Service, Inc.
3. The purpose of the corporation is to engage in any lawful act or activity for which
corporations may be organized under the General Corporation Law of Delaware.
4. The total amount of stock this corporation is authorized to issue is
1000 shares (number of authorized shares) with a par value of
\$ 0.001 per share.
5. The name and mailing address of the incorporator are as follows:

Name Kellar McCloy
Mailing Address 1440 N Edgewood St., Floor 4
Arlington, VA Zip Code 22201

By: Kellar McCloy
Incorporator

Name: Kellar McCloy
Print or Type

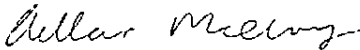

Rebel Health Medical Services, P.A.
1440 N Edgewood St.
Floor 4
Arlington, VA 22201

December 30, 2024

RE: Change in Shareholder Status In Delaware

To whom it may concern,

I, Dr. Kellar McCloy, Incorporator of Rebel Health Medical Services, P.A., certifies that the company, Rebel Health Medical Services, P.A., has undergone a change of ownership. As of the 30th day of December 2024, I, Dr. Kellar McCloy, am no longer a shareholder and Dr. Eric Brittain (License No. C1-0027669) shall be the sole shareholder of the company.

	
By: <u>Kellar McCloy</u>	By: <u>Eric Brittain</u>

STATE OF DELAWARE
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3. The purpose of the corporation is to engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of Delaware.
4. The total amount of stock this corporation is authorized to issue is
1000 shares (number of authorized shares) with a par value of
\$ 0.001 per share.
5. The name and mailing address of the incorporator are as follows:

Name Eric Brittain
Mailing Address 1440 N Edgewood St., Floor 4
Arlington, VA Zip Code 22201

By: Eric Brittain
Incorporator

Name: Eric Brittain
Print or Type

Delaware

The First State

Page 1

I, CHARUNI P. SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REBEL HEALTH MEDICAL SERVICES, P.A." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REBEL HEALTH MEDICAL SERVICES, P.A." WAS INCORPORATED ON THE TWENTIETH DAY OF DECEMBER, A.D. 2024.

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



10045288 8300

SR# 20250298103

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

A handwritten signature in black ink that reads "C. P. Sanchez". The signature is written in a cursive style with a large, sweeping "S" at the end.

Charuni P. Sanchez, Secretary of State

Authentication: 202807433

Date: 01-29-25