**FOREIGN REGISTRATION STATEMENT**

Title 30, Chapter 21, Idaho Code

Base Filing fee: \$100.00 + \$20.00 for manual processing (form must be typed).

For Office Use Only

-FILED-

File #: 0005447315

Date Filed: 10/23/2023 1:03:00 PM

1. The name of the entity is: 9amHealth Medical Group, P.A.
2. The name which it shall use in Idaho is: _____
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:
- | | |
|---|--|
| <input checked="" type="checkbox"/> Business Corporation | <input type="checkbox"/> General Partnership |
| <input type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> General Cooperative Association |
| <input type="checkbox"/> Limited Liability Partnership | <input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership) |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust |
| <input type="checkbox"/> Other: _____ (Use "Other" only if your foreign entity type is not listed above, and enter the type here.) | |
4. Jurisdiction of formation: Florida
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is: 914 N Coast Hwy 101 Ste A Encinitas, CA 92024
(Street Address)

(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

(Street Address)

(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)
8. Name and street address of registered agent in Idaho: COGENCY GLOBAL INC. 1555 W. Shoreline Drive, Suite 100, Boise, ID 83702
(Name and Address)
9. The name, capacity, and mailing address of at least one governor:
- | | | |
|-------------------|---------------------|---|
| <u>Jonah Mink</u> | <u>President</u> | <u>1321 Upland Dr., Suite 18399, Houston, TX, 77043</u> |
| (Name) | (Capacity) | (Address) |
| _____ (Name) | _____ (Capacity) | _____ (Address) |

Typed Name: Jonah Mink, M.D.Signature: 
F480C060F6500470Capacity: President

Secretary of State use only

State of Florida

Department of State

I certify from the records of this office that 9AMHEALTH MEDICAL GROUP, P.A. is a corporation organized under the laws of the State of Florida, filed on February 2, 2023.

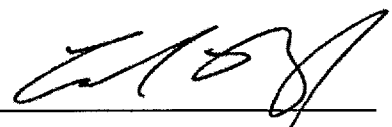
The document number of this corporation is P23000008534.

I further certify that said corporation has paid all fees due this office through December 31, 2023 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 Seventeenth day of October,
2023*




Secretary of State

Tracking Number: 9410561823CU

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

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