

Filing Fee: \$150.00

ID Number: _____



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is:

Travel Nurse Across America, LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

N/A

3. The limited liability company is organized under the laws of Arkansas

4. The date of its organization is April 30, 2004

5. The period of duration of the limited liability company is (if perpetual, so state) Perpetual

6. The address of the limited liability company's resident agent in Rhode Island is:

155 South Main Street, Suite 301

Providence

, RI 02903

(Street Address, not P.O. Box)

(City/Town)

(Zip Code)

and the name of the resident agent at such address is C T Corporation System

(Name of Agent)

7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is:

11300 Cantrell Road, Ste 102

Little Rock, AR 72212

9. The mailing address for the limited liability company is:

11300 Cantrell Road, Ste 102

Little Rock, AR 72212

FILED

MAR 23 2009

By MD 11:47

29-84457

10. Management of the Limited Liability Company:

- A. The limited liability company is to be managed ☒ by its members. *(If you have checked this box, go to item no. 11.)*

or

- B. The limited liability company is to be managed ☐ by one (1) or more managers. *(If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)*

<u>Manager</u>	<u>Address</u>
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11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: 3/13/2009

Travel Nurse Across America, LLC

Print Exact Name of Limited Liability Company Making Application

By Carla Duce
Signature of authorized person

LLC Name & Address of All Members & Managers

Members:

JPMS Investment Partnership I , 11300 Cantrell Road, Suite 301, Little Rock, AR 72212

Michael F. Lax, 55 Ranch Ridge Road, Little Rock, AR 72212

Phil Phillips, 659 Randall-Webbe Lane ,Springdale, AR 72764

Gerald Johnston, 2821 Alliance Place, Springdale, AR 72764

Grant Fortson, 5 Chambord Lane, Little Rock, AR 72223

Derek King, 13415 Christopher Drive, Little Rock, AR 72212

Steve Murray, 18 Marcella Drive, Little Rock, AR 72223

Carla Price, 6931 Park Meadows Dr., Sherwood, AR 72120

Managers:

*B. Gene Scott, Chief Executive Officer, 11300 Cantrell Road Suite 102, Little Rock, AR 72212 *

Leigh Castleberry, Chief Operating Officer, 11300 Cantrell Road Suite 102, Little Rock, AR 72212

Gary Jones, Vice-President of Sales, 11300 Cantrell Road Suite 102, Little Rock, AR 72212

*Member of JPMS Investment Partnership



**Arkansas Secretary of State
Charlie Daniels**

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

Certificate of Good Standing

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

TRAVEL NURSE ACROSS AMERICA, LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office April 30, 2004.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 9th day of March 2009.



Charlie Daniels
Secretary of State

Online Certificate Authorization Code: f9eda4b1e4daca3

To verify the Authorization Code, visit sos.arkansas.gov