

**State of Rhode Island
Office of the Secretary of State**

Fee: \$310.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040**Foreign Corporation****Application for Certificate of Authority**

(Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended)

SECTION IThe name of the corporation is Sound Physicians Telemedicine, Inc.**SECTION II**It is incorporated under the laws of State: DE Country: USA

This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing

SECTION III

The name, if different, which it elects to use in Rhode Island:

(a) If the name of the corporation does not contain the word "corporation", "company", "incorporated", or "limited", or an abbreviation thereof, add one of these corporate endings for use in Rhode Island **OR**

(b) if the corporation proposes to qualify and transact business under a different name, list that name:

*Note: If option (b) is elected, a Fictitious Business Name Statement (FORM 624A) is required to be filed with this application***SECTION IV**The date of its incorporation is 2/28/2018and the period of its duration is ☒ Perpetual ☐**SECTION V**

The location of its principal office is

No. and Street: 120 BRENTWOOD COMMONS WAY
SUITE 510City or Town: BRENTWOODState: TNZip: 37027Country: USA**SECTION VI**

The address of its proposed registered office in Rhode Island is

No. and Street: 222 JEFFERSON BLVD
SUITE 200City or Town: WARWICKState: RIZip: 02888and the name of its proposed registered agent in Rhode Island at that address is CORPORATION SERVICE COMPANY**SECTION VII**

The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

PROVISION OF TELEMEDICINE TECHNOLOGY AND MANAGEMENT SERVICES.**SECTION VIII**

(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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PRESIDENT	JEFFREY ALTER	120 BRENTWOOD COMMONS, SUITE 510 BRENTWOOD, TN 37027 USA
TREASURER	MICHAEL TEMPLER	120 BRENTWOOD COMMONS WAY, SUITE 510 BRENTWOOD, TN 37027 USA
SECRETARY	NICOLE H KLUG ESQ.	120 BRENTWOOD COMMONS WAY, SUITE 510 BRENTWOOD, TN 37027 USA
VICE PRESIDENT	JOHN BIRKMEYER MD	120 BRENTWOOD COMMONS, SUITE 510 BRENTWOOD, TN 37027 USA
DIRECTOR	JEFFREY ALTER	120 BRENTWOOD COMMONS WAY, SUITE 510 BRENTWOOD,, TN 37027 USA

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JEFFREY ALTER	120 BRENTWOOD COMMONS, SUITE 510 BRENTWOOD, TN 37027 USA
TREASURER	MICHAEL TEMPLER	120 BRENTWOOD COMMONS WAY, SUITE 510 BRENTWOOD, TN 37027 USA
SECRETARY	NICOLE H KLUG ESQ.	120 BRENTWOOD COMMONS WAY, SUITE 510 BRENTWOOD, TN 37027 USA
VICE PRESIDENT	JOHN BIRKMEYER MD	120 BRENTWOOD COMMONS, SUITE 510 BRENTWOOD, TN 37027 USA
DIRECTOR	JEFFREY ALTER	120 BRENTWOOD COMMONS WAY, SUITE 510 BRENTWOOD,, TN 37027 USA

SECTION IX

The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Num of Shares</i>	
CWP		100	\$0.0100	100.00

Signed this 21 Day of January, 2025 at 1:55:28 PM by the officers(s). *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.*

By NICOLE H. KLUG, ESQ.
Signature of Authorized Officer of the Corporation

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUND PHYSICIANS TELEMEDICINE, INC." 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 SEVENTH DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUND PHYSICIANS TELEMEDICINE, INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2018.

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



6775567 8300

SR# 20250036472

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 in a small font.

Authentication: 202626648

Date: 01-07-25

Delaware

The First State

Page 1

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State of Rhode Island

Department of State | Office of the Secretary of State

Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

January 21, 2025 01:53 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is written in a cursive style.

Gregg M. Amore
Secretary of State

