



COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

Office of the Clerk

September 29, 2017

1710020320

JABREL SAMUEL
CT CORPORATION SYSTEMS
4701 COX RD
STE 285
GLEN ALLEN, VA 23060

RECEIPT

RE: Adfinitas Health at Fauquier, LLC

ID: T071791 - 0

DCN: 17-09-28-1220

Dear Customer:

This receipt acknowledges payment of \$100.00 to cover the fee for filing an application for a certificate of registration to transact business in Virginia with this office.

This receipt also acknowledges payment of \$100.00 to cover the fee for expedited service.

The effective date of the registration is September 29, 2017.

If you have any questions, please call (804) 371-9733 or toll-free in Virginia, (866) 722-2551.

Sincerely,

Joel H. Peck
Clerk of the Commission

RECEIPTLC
LLNCF
CISJMA



1710020320

CT Corporation

Clerk's Office
State Corporation Commission
1300 E. Main Street
Richmond, Virginia 23219

4701 Cox Road
Suite 285
Glen Allen, VA 23060

gr \$200
170928 1220

Date: 09/28/2017
Entity Name: Adfinitas Health at Fauquier, LLC
Order Number: 10651254 SO

Please file the attached on behalf of the above entity's documents as identified below:

Documents Requested	Instructions
Articles of Incorporation/Organization	
Certificate of Authority/Qualification	
Certificate of Limited Partnership	
Amendment	
Merger	
Dissolution/Termination/Withdrawal	
Reinstatement	
Name Reservation/Renewal	
Fictitious Name	
Registered Agent Change	
Other	X Certified Copy of Registration

Special Instructions:

Check(s) in the amount of \$0.00 enclosed.
Please call when evidence is available and hold documents for pickup.
If there are any problems with the filing, please call us at (804) 217-7255.

Thank you,

Jabrel Samuel

C-BB
C-BB
8/29

Jabrel Samuel
CT Corporation System
Richmond Fulfillment Office

F-MD
100
100
200
9/29/17
KEP
T071791-0



SCC21.2
(01/17)

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION
OFFICE OF THE CLERK
1300 E MAIN ST
RICHMOND, VA 23219
(804) 371-9733
1-866-722-2551 Toll-free in Virginia



1710020320

This form **MUST** be completed and placed on top of **EACH** document submission (so it can be readily identified as a request for expedited review and processing).

Name of Corporation or Company (etc.): (Must be typed for Email option.) Adfinitas Health at Fauquier, LLC		SCC ID No. (if known):
Customer Contact Information: Firm: CT Corporation Systems Attn: Jabrel Samuel Address: 4701 Cox Road Suite 285 Glen Allen VA 23060 <small>(city or town) (state) (zip code)</small> Telephone: (804) 217 - 7255 ext _____ Email: CLS-CTRICHMOND@WOLTERSCLUWER.COM		Send Evidence of Expedited Filing By: (Choose <u>one</u>) <input checked="" type="checkbox"/> Email (Only available for Categories A, C and D) <div style="border: 1px solid black; padding: 5px; margin: 5px;"> <p>Two typed originals of this form must be submitted for Email option. See "Return of Evidence" in the Instructions.</p> </div> <input type="checkbox"/> Hold for Pickup (Available at 4:00 p.m.) <input type="checkbox"/> First-Class Mail <input type="checkbox"/> USPS Express Mail (Prepaid envelope required.) <input type="checkbox"/> Overnight via <input type="checkbox"/> UPS <input type="checkbox"/> Fed Ex <small>(Completed waybill required. For Fed Ex, the waybill must be computer-generated with a barcode.)</small>
~~ See Information & Instructions for description of Categories. ~~ Expedited Service Requested: (mark service requested) *** Expedite Fee: (other fees may be needed – see footnote)		FOR OFFICE USE ONLY 170928 1220
<input checked="" type="checkbox"/> Category A Expedite Business Entity Document listed in Schedule A <input type="checkbox"/> Same Day Service (Received by 10:00 a.m.) \$ 200 <input checked="" type="checkbox"/> Next Day Service (Received by 2:00 p.m.) \$ 100 <input type="checkbox"/> Category B Preliminary Review of Document listed in Schedule A \$ 50 (2 nd Business Day Service Only – Received by 2:00 p.m.) <input type="checkbox"/> Resubmission within 30 Days of initial Pre-Review (N/C) <input type="checkbox"/> Category C Expedite Business Entity Document listed in Schedule C \$ 50 (Next Day Service Only – Received by 2:00 p.m.) <input type="checkbox"/> Category D Expedite Application for Reinstatement \$ 50 (Next Day Service Only – Received by 2:00 p.m.)		I/O <input type="checkbox"/>

*** Submit one payment for all applicable fees (e.g., charter/entrance, reinstatement, filing and expedite fees)

REVIEW THE INSTRUCTIONS BEFORE SUBMITTING THIS FORM.

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

AT RICHMOND, SEPTEMBER 29, 2017

The State Corporation Commission has found the accompanying application for a certificate of registration to transact business in Virginia submitted on behalf of

Adfinitas Health at Fauquier, LLC

to comply with the requirements of law, and confirms payment of all required fees. Therefore, it is ORDERED that this

CERTIFICATE OF REGISTRATION TO TRANSACT BUSINESS IN
VIRGINIA

be issued and admitted to record with the application in the Office of the Clerk of the Commission, effective September 29, 2017.

STATE CORPORATION COMMISSION

By



Judith Williams Jagdmann
Commissioner

FLLCACPT
CISJMA
17-09-28-1220

1710020320



LLC-1052
(06/16)

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

APPLICATION FOR A CERTIFICATE OF REGISTRATION TO TRANSACT
BUSINESS IN VIRGINIA AS A FOREIGN LIMITED LIABILITY COMPANY

Provide a
Certified
Copy of the
Formation
Document,
as Amended

1710020320

REVIEW THE INSTRUCTIONS BEFORE SUBMITTING THIS FORM.

LLC's name: Adfinitas Health at Fauquier, LLC

Designated name (if required): _____

State or other jurisdiction of organization: Maryland

Date of formation: June 2, 2017 Period of duration: perpetual

(Mark if applicable) The LLC was previously authorized or registered to transact business in Virginia as a foreign business entity. (See Instructions.) *Set forth additional information on an attachment.*

The post office address, including the street and number, of the LLC's principal office is
7250 Parkway Drive, Suite 500 Hanover MD 21076
(number/street) (city or town) (state) (zip)

The LLC's registered agent in VIRGINIA is C T Corporation System ✓

The registered agent is (mark appropriate box):

(1) an INDIVIDUAL who is a resident of Virginia and

- a member or manager of the LLC.
- a member or manager of a limited liability company that is a member or manager of the LLC.
- an officer or director of a corporation that is a member or manager of the LLC.
- a general partner of a general or limited partnership that is a member or manager of the LLC.
- a trustee of a trust that is a member or manager of the LLC.
- a member of the Virginia State Bar.

OR

(2) a domestic or foreign stock or nonstock corporation, limited liability company or registered limited liability partnership authorized to transact business in Virginia.

The LLC's VIRGINIA registered office address, including the street and number, if any, which is identical to the business office of the registered agent, is

4701 Cox Road, Suite 285 Glen Allen VA 23060
(number/street) (city or town) (zip)

which is physically located in the county or city of Henrico

The Clerk of the Commission is hereby irrevocably appointed as the agent of the limited liability company for service of process if (i) the company fails to maintain a registered agent in Virginia as required by § 13.1-1015 of the Code of Virginia, (ii) the registered agent's authority has been revoked, (iii) the registered agent has resigned, or (iv) the registered agent cannot be found or served with the exercise of reasonable diligence.

The LLC affirms that it is a "foreign limited liability company" as defined in § 13.1-1002 of the Code of Virginia.

Signed in the name of the foreign limited liability company by:

(signature)

9-26-2017
(date)

443-949-0814
(telephone number (optional))

Douglas S. Mitchell, M.D., MBA
(printed name)

Chief Executive Officer of Adfinitas Health, LLC,
sole Member of MDICS at StoneSprings, LLC

The person signing above has been delegated the right and power to manage the LLC's business and affairs.

Personal Information, such as a social security number, should NOT be included in a business entity document submitted to the Office of the Clerk for filing with the Commission. For more information, see Notice Regarding Personal Identifiable Information at www.scc.virginia.gov/clk.

#5660326

1710020320

ADFINITAS HEALTH VIRGINIA, LLC
ARTICLES OF ORGANIZATION

FIRST: I, Elliott Cowan, whose post office address is 233 East Redwood Street, Baltimore, Maryland 21202, being at least eighteen (18) years of age, having been duly authorized to execute and file these Articles of Organization by the member of the limited liability company named herein, hereby form a limited liability company under and by virtue of the Maryland Limited Liability Company Act and the General Laws of the State of Maryland.

SECOND: The name of the limited liability company (which is hereinafter called the "Company") is

Adfinitas Health Virginia, LLC *n/d*

THIRD: The purpose for which the Company is formed is to engage in any lawful acts or activities permitted by a limited liability company organized under the laws of the State of Maryland.

FOURTH: The post office address of the principal office of the Company in this State is 7250 Parkway Drive, Suite 500, Hanover, Maryland 21076.

FIFTH: The name of the resident agent of the Company in this State is Elliott Cowan. Such resident agent is an individual actually residing in this State. The post office address of such resident agent is 233 East Redwood Street, Baltimore, Maryland 21202.

IN WITNESS WHEREOF, I have signed these Articles of Organization on this 2nd day of June, 2017, and I acknowledge the same to be my act.

Elliott Cowan

Elliott Cowan

The undersigned individual hereby consents to being designated as the resident agent for Adfinitas Health Virginia, LLC.

Elliott Cowan

Elliott Cowan

STATE OF MARYLAND

I hereby certify that this is a true and complete copy of the
age document on file in this office. DATED: 9/26/17
STATE DEPARTMENT OF ASSESSMENTS AND TAXATION:
BY: *[Signature]*, Custodian
This stamp replaces our previous certification system. Effective:

1710020320

ADFINITAS HEALTH VIRGINIA, LLC

ARTICLES OF AMENDMENT

Adfinitas Health Virginia, LLC, a Maryland limited liability company (the "Company") hereby certifies to the State Department of Assessments and Taxation of Maryland that the Articles of Organization of the Company are hereby amended by striking out ARTICLE SECOND and inserting in lieu thereof the following:

SECOND: The name of the limited liability company (hereinafter referred to as the "Company") shall be:

Adfinitas Health at Fauquier, LLC *Nb*

IN WITNESS WHEREOF, the authorized person of the Company has signed these Articles of Amendment on this 22 day of June, 2017, and acknowledges the same to be the act of the Company.

ADFINITAS HEALTH VIRGINIA, LLC

By: *Eric T. Nass*
Eric T. Nass, Authorized Person

5512988.1

STATE OF MARYLAND
I hereby certify that this is a true and correct copy of the Articles of Amendment as filed in this office. Date: 6/28/2017
Kimberly V. Johnson
Secretary of Assessments and Taxation

CORPORATE CHARTER APPROVAL SHEET

****EXPEDITED SERVICE****

**** KEEP WITH DOCUMENT ****

DOCUMENT CODE 41A BUSINESS CODE _____

W18046185

Close _____ Stock _____ Nonstock _____

P.A. _____ Religious _____

Merging (Transferor) _____

Affix Barcode Label Here

Affix Barcode Label Here

New Name Adfinnas Health at Fauquier, LLC

FEES REMITTED

Base Fee:	<u>100</u>
Org. & Cap. Fee:	_____
Expedite Fee:	<u>70</u>
Penalty:	_____
State Recordation Tax:	_____
State Transfer Tax:	_____
Certified Copies	_____
Copy Fee:	<u>22</u>
Certificates	_____
Certificate of Status Fee:	_____
Personal Property Filings:	_____
Mail Processing Fee:	_____
Other:	_____
TOTAL FEES:	<u>172</u>

- Change of Name
- _____ Change of Principal Office
- _____ Change of Resident Agent
- _____ Change of Resident Agent Address
- _____ Resignation of Resident Agent
- _____ Designation of Resident Agent and Resident Agent's Address
- _____ Change of Business Code
- _____ Adoption of Assumed Name
- _____ Other Change(s)

Credit Card _____ Check Cash _____

Documents on 3 Checks

Approved By: _____

Keyed By: _____

COMMENT(S):

Code 032

Attention: Lisa B. Mohan, Legal Assistant

Mail: Name and Address
Gordon Feinblatt

233 East Redwood Street

Baltimore, MD 21202

Stamp Work Order and Customer Number HERE