Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 12000000195 : (850) 521-1000 : (850)558-1515 Fax Number

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION UNIVITA HEALTH INC.

Certificate of Status	1
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Corporate Eiling Menu

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3/24/2010

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.

Univita Healt	h Inc.			
	corporation; must include "INCORPORA" corp," "Inc," "Co," or "Corp.")	TED	," "COMPANY," "CORPORATION,"	4 *
(If name unavail	able in Florida, enter alternate corporate r	ıame	adopted for the purpose of transacting business in	Florida)
2. Delaware		_ 3.	26-3778546	
(State or country	under the law of which it is incorporated))	(FBI number, if applicable)	
4. 11-25-08		5.	perpetual	•
(Date	of incorporation)		(Duration: Year corp. will cense to exist or "per	petual")
6.				
·			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7. 8601 N. Scotts	sdale Road, Suite 335, Scottsdale,	4 Z i	85253	
	(Principal office	e acid	lresa)	
11000 Prairie	Lakes Drive, Suite 600, Eden Prari	ie, l	MN 55344	
	(Current mailing	g add	iress)	
,				
8. Holding Com	pany			
(Purpose(s	s) of corporation authorized in home state	or c	ountry to be carried out in state of Florids)	
9. Name and stree	at address of Florida registered agent:	(P.	D. Box NOT acceptable)	AL SS
Name:	Corporation Service Company			
Office Address:	1201 Hays Street			SECRETARY ALLAHASSI
	Tallahassee		, Florida 32301	SE SE
•	(City)		(Zip code)	
				ST ST
	gent's acceptance: sed as registered opent and to accept :	servi	ice of process for the above stated corporation	D> •
designated in this	application, I hereby accept the appo	ગોમધ	ment as registered agent and agree to act in th	is capacity.
			elative to the proper and complete performan	ice of my duties
ana I am famillar	with and accept the obligations of m	y po	isuion as registered agent.	
_	Orporation Service Company	`	Dona L. Priebe, Assistant VP	
;	Paristand apart's sinne	*****		

11. 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.

1

12. Names and business addresses of officers and/or directors;
A. DIRECTORS
Chairman: L. Ben Lytle
Address: 8601 N. Scottsdale Road, Sulte 335
Scottsdale, AZ.85253
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
And the same of th
п омистьс
B. OFFICERS
President: Hugh Lytle
Address: 8601 N. Scottsdale Road, Suite 335
Scottsdale, AZ 85253
Vice President: Peter Goldstein
Address: 11000 Prairie Lakes Drive, Suite 600, Eden Prairie, MN 55344
11000 Prairie Lakes Drive, Suite 600, Eden Prairie, MN 55344
Secretary:
Address:
Treasurer: Jeffrey Sjobeck (CFO)
Address: 11000 Prairie Lakes Drive, Suite 600, Eden Prazie, MN 55344
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. Jeffrey Sjobeck, CFO
(Typed or printed name and capacity of person signing application)

Delaware

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIVITA HEALTH 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 TWENTY-FOURTH DAY OF MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIVITA HEALTH INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2008.

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

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

4627088 8300

100313433

You may verify this certificate onling

Jeffrey W. Bullock, Secretary of S AUTHENTY CATION: 7890119

DATE: 03-24-10