

F95000001064

 (Requestor's Name)

 (Address)

 (City, State, Zip) (Phone #)

OFFICE USE ONLY

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 02728735--01086--010
 *****20.00 *****20.00

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. AmeriMed Health Systems, Inc. W95-4502
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

8200 20 5-21-06
 DIVISION OF REVENUE
 3/16

File original & date stamp copy.

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials _____

Akerman Senterfitt & Eidson P.A.
(Requestor's Name)

(Address)

(City, State, Zip) (Phone #)

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RECEIVED
CORPORATION DIVISION
SEP 10 1993
10:30 AM

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503 FLORIDA STATUTES THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA

1. AmeriMed Health Systems, Inc.
(Name of corporation must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as well clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present)
2. Delaware
(State or county under the law of which it is incorporated)
3. Applied for
(FEI number, if applicable)
4. December 14, 1994
(Date of Incorporation)
5. Perpetual
(Duration. Year corp. will cease to exist or "perpetual")
6. February 17, 1994 1995
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 607.1503 F.S.))
7. 12000 Biscayne Blvd., Suite 108, Miami, Florida 33181

(Current mailing address)
8. Holding company for health plans operating in other states.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. **Name and street address of Florida registered agent:**

Name: American Information Services, Inc.

Office Address: 801 Brickell Avenue, 24th Floor

Miami Florida, 33131
(Zip Code)
10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

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

12 Names and Addresses of officers and/or directors

A DIRECTORS

Director Alan Dome
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

Director Alberto Gutman
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

Director Robert Elkins
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

Director Eric Hanson
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

Director Hershel Krasnow
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181


Director Mark Tabak
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

B. OFFICERS

President: Alan Dome
Address 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

Vice President: Craig Dome
Address: 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

Secretary/Treasurer: Vilma Quintana
Address: 12000 Biscayne Blvd., Suite 108
Miami, Florida 33181

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Craig Dome, Vice President
(Typed or printed name and capacity of person signing application)

State of Delaware

Office of the Secretary of State

DELAWARE, DO HEREBY CERTIFY THAT THE ABOVE IS A TRUE AND CORRECT COPY OF THE RECORDS OF THE SERVICE DIVISION AS OF THE DATE HEREON MADE.

SECRET
DIVISION



Edward F. Fitch

Edward F. Fitch, Secretary of State

AUTHENTICATION

DATE