

Occupation Number Only  
**F95 000004260**

C T CORPORATION SYSTEM

Requestor's Name  
 660 East Jefferson Street

Address  
 Tallahassee, Florida 32301

City State Zip Phone  
 904-222-1092

CORPORATION(S) NAME

100001576170  
 -09/01/95--01010--0.25  
 \*\*\*\*\*70.00 \*\*\*\*\*70.00

*Liberty Mutual Managed Care, Inc.*

- Profit
- NonProfit
- Limited Liability Company
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Mail Out
- Amendment
- Dissolution/Withdrawal
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other
- Change of R.A.
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Updater
Verifier
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W.P. Verifier

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APPLICATION BY FOREIGN CORPORATION FOR  
AUTHORIZATION TO TRANSACT 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:

1. Liberty Mutual Managed Care, Inc.  
(Name of corporation: must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Massachusetts  
(State or country under the law of which it is incorporated)

3. December 17, 1993 4. Perpetual  
(Date of Incorporation) (Duration)

5. 04-1217691  
(Federal Employer Identification number, if applicable)

6. Upon Qualification  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 175 Berkeley Street, Boston, Massachusetts 02117  
(Current mailing address)

8. Directly or indirectly provides Managed Care Services.  
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and street addresses of officers and or directors:

**A. Directors:**

Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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CORPORATION  
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9. Officers:

President: See attached list of officers

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

(if needed, you may attach an addendum to the application listing additional officers and/or directors.)

10. Name and Street address of Florida registered agent:

Name: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

Zip Code

11. 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: \_\_\_\_\_

*Lauren H. Heatz*  
C T Corporation System  
LAUREN H. HEATZ

SPECIAL ASST SECRETARY

(Typed Name and Title of Officer)

12. 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.

13. *Matthew J. Nickerson*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Matthew D Nickerson, Vice President

(Name and capacity of person signing application)

LIBERTY MUTUAL MANAGED CARE, INC.

<u>OFFICE</u>	<u>NAME AND WORK ADDRESS</u>
President and Chief Executive Officer	Thomas C. Ramey 175 Berkeley Street Boston, MA 02117
Vice President/ Treasurer	Matthew D. Nickerson 175 Berkeley Street Boston, MA 02117
Vice President/ Secretary and Clerk	Barry S. Gilvar 175 Berkeley Street Boston, MA 02117
Vice President	Richard Downey 225 Borthwick Avenue Portsmouth, NH 03801
Vice President	James Hatherley 175 Berkeley Street Boston, MA 02117
Vice President	Reginald K. Wakefield 100 Main Street Dover, NH 03820
Assistant Secretary	Howard Novick 175 Berkeley Street Boston, MA 02117
Assistant Secretary	James R. Pugh 175 Berkeley Street Boston, MA 02117
Assistant Secretary	Laurance H.S. Yahia 175 Berkeley Street Boston, MA 02117
Director	Gary L. Countryman 175 Berkeley Street Boston, MA 02117

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SECRETARY OF STATE

OFFICE

NAME AND WORK ADDRESS

Director

Antonio C. Ferronato  
175 Berkeley Street  
Boston, MA 02117

Director

Robert H. Gruhl  
175 Berkeley Street  
Boston, MA 02117

Director

Edmund F. Kelly  
175 Berkeley Street  
Boston, MA 02117

Director

: Christopher C. Mansfield  
175 Berkeley Street  
Boston, MA 02117

Director

Thomas C. Ramey  
175 Berkeley Street  
Boston, MA 02117

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William Francis Galvin  
Secretary of the  
Commonwealth

*The Commonwealth of Massachusetts*

*Secretary of the Commonwealth*

*State House, Boston, Massachusetts 02133*

August 22, 1995

TO WHOM IT MAY CONCERN:

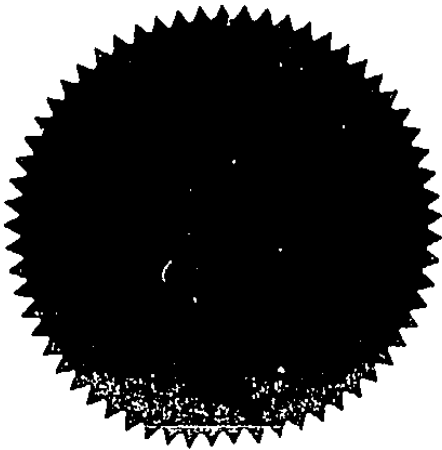
I hereby certify that according to the records of this office

**Liberty Mutual Managed Care, Inc.**

is a domestic corporation organized on December 17, 1993, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156B section 101 for said corporations dissolutions; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

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DEPARTMENT OF STATE  
D. ...  
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In testimony of which,  
I have hereunto affixed the  
Great Seal of the Commonwealth  
on the date first above written.

*William Francis Galvin*

Secretary of the Commonwealth

\* This is not a tax clearance. Certificates certifying that all taxes due and payable by the corporation have been paid or provided for are issued by the Department of Revenue.