

ALSTON & BIRD

F96000002223

1201 West Peachtree Street
Atlanta, Georgia 30309-3421
404-881-7000
Fax: 404-881-7777

WS96-7841

Lynn E. Boren, Legal Assistant

Direct Dial: 404-881-7893

March 20, 1996

Via Federal Express

Office of the Florida Secretary of State
409 East Gaines Street
Tallahassee, Florida 32399

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 MAY -3 AM 8:27

Re: Southeastern Therapists, Inc.

Dear Sirs:

For your consideration, we are submitting herewith an application (two originals) for foreign qualification for the above-referenced Georgia corporation.

The company's check in the amount of \$78.75 is enclosed to cover the cost of your filing fee and certificate of existence. Please send the certificate to my attention at the above address.

Also enclosed is the application for registration of the fictitious name. Attached thereto is the company's check in the amount of \$60.00 to cover the cost of registration and the certificate of status, which I understand will be mailed to the company. **Please insert the Florida Registration Number in Section 2 before forwarding this form for processing.**

Please call me at my direct dial number listed above with any questions.

Sincerely,

Lynn E. Boren, Legal Assistant

900001813159
-05/08/96--01047--004
*****78.75 *****78.75

leb
Enclosures
cc: Kimberly A. Ackourey, Esq.
[AD960790.166]



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthum
Secretary of State

April 11, 1996

LYNN E. BOREN
ALSTON & BIRD
1 ATLANTIC CENTER, 1201 W PEACHTREE ST
ATLANTA, GA 30309-3424

SUBJECT: SOUTHEASTERN THERAPISTS, INC.
Ref. Number: W96000007841

We have received your document for SOUTHEASTERN THERAPISTS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6094.

Doug Dickinson
Document Specialist

Letter Number: 596A00016617

B. Officers:

President: James Palazzolo
Address: 2520 Pheasant Avenue
Albany, GA 31701

Vice Pres: Timothy Castle
Address: 818 South College Avenue
Douglas, GA

Secretary: Earl Robinson
Address: 1555 Dogwood Lane
Middleburg, FL 32068

Treasurer: Kim Tuttle
Address: Route 2, Box 864
Ridgeland, SC 29936

(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: **CT CORPORATION SYSTEM**
Office address: c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324

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.

CT CORPORATION SYSTEM

Registered agent's signature:

Mary R. Adams
(Officer)

Mary R. Adams, Assistant Secretary
(Type 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. [Signature]

(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. TIMOTHY CASTLE VICE PRESIDENT/DIRECTOR

(Name and capacity of person signing application)

Secretary of State
Business Information and Services
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 960710463
CONTROL NUMBER : 9519704
DATE INC/AUTH/FILED: 06/29/1995
JURISDICTION : GEORGIA
PRINT DATE : 03/11/1996
FORM NUMBER : 211

LYNN BOREN
ATSTON & BIRD
1201 W. P'TREE ST
ATLANTA GA 30309-3424

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY -3 AM 8:28

CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

SOUTHEASTERN THERAPISTS, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

