

F99000004254



THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 330615 4802897

AUTHORIZATION : *Patricia Pignato*

COST LIMIT : \$ 70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG 18 AM 11:39

ORDER DATE : August 4, 1999

ORDER TIME : 10:03 AM

ORDER NO. : 330615-005

CUSTOMER NO: 4802897

500002962885-1

CUSTOMER: Phyllis J. Conn, Legal Asst
Garfunkel Wild & Travis
111 Great Neck Rd.
Ste. 503
Great Neck, NY 11021

FOREIGN FILINGS

NAME: ST. BARNABAS HOSPITAL

XXXX QUALIFICATION (TYPE: NP)

6

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: James Guy

NYK
8/18/99

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TRANSMITTAL LETTER

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
99 AUG 18 AM 11:39

TO: Qualification/Registration Section
Division of Corporations

SUBJECT: St. Barnabas Hospital, Inc.
(Name of Corporation)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Judith Eisen, Esq.
(Name of Person)

Garfunkel, Wild & Travis, P.C.
(Firm/Company)

111 Great Neck Road, Suite 503
(Address)

Great Neck, New York 11021
(City, State and Zip Code)

For further information concerning this matter, please call:

Judith Eisen at (516) 393-2220
(Name of Person) Area Code & Daytime Telephone Number

STREET ADDRESS:
Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Tax Lien Section
- Division of Corporations
P. O. Box 6327
- Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

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1. St. Barnabas Hospital, Inc.
(Name of corporation: must include the word "INCORPORATED" 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. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. New York 3. 13-1740122
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 6/11/1877 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. Third Avenue and 183rd Street
Bronx, New York 11457
(Current mailing address)
8. Any lawful act or activity
(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:

CORPORATION SERVICE COMPANY
(Name)
1201 Hays Street
(Office address)
Tallahassee Florida, 32301-2607
(City) (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.

By: Laura R. Perry
(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: (Street address only- P. O. Box NOT acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____ See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: _____ See Attached

Address: _____

Vice President: _____

Address: _____

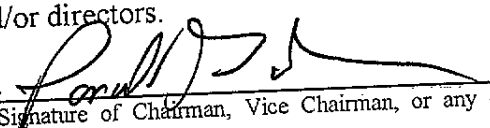
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

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

Ronald Gade, MD, President

(Typed or printed name and capacity of person signing application)

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APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

ST. BARNABAS HOSPITAL, INC.

Attachment

12. A. Directors

Chairman

Mr. Victor Wright
Hon. John A. Barone
Ms. Elizabeth Bartlett
Paul Cushman, M.D.
Maureen D. Donovan, Esq.
Ms. Magda Fierro
Mrs. Helen Foster
Fletcher Hodges, III
Mr. Thomas Hughes
Mr. Stanley Kreitman
Mr. John McKew
Charles Moerdler, Esq.
Grover O'Neill, Jr.
Maxwell S. Pfeifer, Esq.
Ms. Elizabeth Sanchez
Mr. Salvatore Sclafani
Stanley Schiowitz, D.O.
Matthew Schure, Ph.D.
Sharon Smith, Ph.D.
Mr. John N. Tognino
Rev. Jeffrey P. von Arx, S.J.
Joseph Waltz, M.D.

Address:

St. Barnabas Hospital, Inc.
Third Avenue and 183rd Street
Bronx, New York 11457

B. Officers

President

Ronald Gade, M.D.
St. Barnabas Hospital, Inc.
Third Avenue and 183rd Street
Bronx, New York 11457

Senior Vice President of
Administration and Treasurer

John Maher
St. Barnabas Hospital, Inc.
Third Avenue and 183rd Street
Bronx, New York 11457

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State of New York } ss:
Department of State

I hereby certify, that the certificate of incorporation of ST. BARNABAS HOSPITAL was filed on 06/11/1877, under the name of HOME FOR INCURABLES, as a Not-for-Profit corporation and that a diligent examination has been made of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

A Certificate of Amendment HOME FOR INCURABLES, changing name to ST. BARNABAS HOSPITAL, was filed 06/30/1975.



Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of August one thousand nine hundred and ninety-nine.

A handwritten signature in cursive script, appearing to read "J. Leub", is written over a horizontal line.

Special Deputy Secretary of State

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