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Tel 314-802-2000 Fax 314-802-2020 Bemiston Tower • Suite 300 231 South Bemiston St. Louis, Missouri 63105

March 5, 1998

Florida Department of State Sandra B. Mortham Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir:

Please be aware that the Catholic Healthcare Audit Network began its first fiscal year July 1, 1997. We did not engage any employees to do business in your state until January 1, 1998. We are asking that you abate any penalties related to this registration. It is our intention to be diligent about our filings. We are a new L.L.C. and have just hired a Controller to handle our financial affairs. As such we are diligently filing and registering in your state in as timely of a manner as is possible. I appreciate your consideration in this matter. I have included the original paperwork with this letter.

Sincerely,

Michael R. Stafford

Controller



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 18, 1998

CATHOLIC HEALTHCARE AUDIT NETWORK, LLC 231 S BEMISTON, STE 300 ST LOUIS, MO 63105

SUBJECT: CATHOLIC HEALTHCARE AUDIT NETWORK, LLC

Ref. Number: W98000003628

We have received your document for CATHOLIC HEALTHCARE AUDIT NETWORK, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1,188.75.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

The affidavit must set forth the amount of the cash and a description and the agreed value of property other than cash contributed by the members, and the amount anticipated to be contributed by the members.

The designation of the registered office and the registered agent, both at the same street address must be contained within the document pursuant to chapter 608, Florida Statutes. If the registered agent or registered office listed is different from the registered agent or registered office on file with this office, the document must contain the date(s) the change(s) was/were approved by a majority of the members. The registered agent must sign accepting the designation.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the

laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 (850) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 698A00009318



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 23, 1998

CATHOLIC HEALTHCARE AUDIT NETWORK, LLC 231 S BEMISTON, STE 300 ST LOUIS, MO 63105

SUBJECT: CATHOLIC HEALTHCARE AUDIT NETWORK, LLC

Ref. Number: W98000003628

We have received your document for CATHOLIC HEALTHCARE AUDIT NETWORK, LLC and your check(s) totaling \$285.00. However, the document has not been filed and is being retained in this office for the following:

We need for you to submit a sworn affidavit stating that the date on the application was in error and that you didn't transact business in our State until January 1998. You failed to include the certificate that we ask for previously.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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 (850) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 798A00015438



Tel 314-802-2000 Fax 314-802-2020 Bemiston Tower • Suite 300 231 South Bemiston St. Louis, Missouri 63105

March 30, 1998

Florida Department of State
Sandra B. Mortham
Secretary of State
Division of Corporations
Diane Cushing, Corporate Specialist
P.O. Box 6327
Tallahassee, FL 32314

ON APR -8 MILL: 19

Dear Ms. Cushing:

Please be aware that the Catholic Healthcare Audit Network began its first fiscal year July 1, 1997. We did not have employees in your state doing business until January 9, 1998. We are headquartered in St. Louis Missouri, and were registered as an L.L.C. effective May 27, 1997 in that State. This letter should serve as your sworn affidavit that is required to complete our registration in Florida.

Sincerely,

Janet Montgomery
Secretary/Treasurer

Notary Certification

NOTARY PUBLIC STATE OF MISSOURI

ST. LOUIS COUNTY

MY COMMISSION EXP. FEB. 10,2002

Diane Barone 4/1/98

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ATHOLIC HEALTHCARD (Name of foreign limited liability company so contained in the name at present.) 2. MISSOURI (Jurisdiction under the law of which foreign			
company is organized)		Duration: Year limited liability	
4. <u>5-27-97</u> (Date of Organization)		exist of perpetual)	
6. 7/1/97 (Date first transacted busine	ess in Florida. (See se	ections 608.501, 608.502, and 817.1	PR → FET FILE 55, F.S.) - 8 CC
7. <u>231 S. BEMISTO</u>			
			~~~ >~~
ST. Louis, Mo 6	3/05 (Street address of p	principal office)	ATTOUS 1: 19
List name, title, and business address will manage the foreign limited liabil	of each managing	g member[MGRM] or manage lorida: (attach additional page	r[MGR]who if necessary)
List name, title, and business address will manage the foreign limited liabil  NAME-SADDRESS:	of each managing ity company in Fi	g member[MGRM] or manage	r[MGR]who
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# CATHOLIC HEALTHCARE AUDIT NETWORK

## CORPORATE OFFICERS

,	#7 <b>01</b> 1	Social Security	Date of
Name & Address	Title	Number	DIIG
David H. LeMoine	President	345-32-5963	6/13/43
231 S. Berniston, Suite 300			
St. Louis, MO 63105			
Phone: (314) 802.2001			
Fax: (314.802.2020			
	į	0000	23/-01/2
Janet Montgomery	Secretary/Treasurer	491-50-3383	1/1/8/55
231 S. Bemiston, Suite 300			
St. Louis, MO 63105			
Phone: (314) 802.2012			
Fax: (314.802.2020			

# CATHOLIC HEALTHCARE AUDIT NETWORK

BOARD OF MANAGERS		Social Security	Date of
Name & Address	Title	Number	Birth
Donald A. Brennan Daughters of Charity National Health System 4600 Edmundson Road St. Louis, MO 63134 Phone: 314.253.6888 Fax: 314.253.6807	Member	523-40-2267	2/26/37
Sister Marie Burns Sisters of Charity Hospital of Buffalo 2157 Main Street Buffalo, NY 14214 Phone: 716.862.1900 Fax: 716.862.1899	Member	144-24-9904	4/5/33
Patricia A. Cahill Catholic Health Initiatives 1999 Broadway, Suite 2605 Denver, CO 80202 Phone: 303.298.9100 Fax: 303.298.9690	Member	029-28-8667	4/13/38
Eleanor G. Claus CHI Central Midwest Region 920 S. 107th Avenue, Suite 200 Omaha, NE 68114 Phone: 402.393.7661 Fax: 402.393.6427	Member	025-30-7103	7/22/33

# CATHOLIC HEALTHCARE AUDIT NETWORK

BOARD OF MANAGERS		Social Security	Date of
Name & Address	Title	Number	Birth
Dennis J. Eike	Member	480-34-4885	3/12/37
DCNHS - West Central Region 7806 Natural Bridge Road St. Louis, MO 63121 Phone: 314.679.1500			
Fax: 514.505.1419	Member	350-26-1228	7/29/34
Emerson B. Houck Eli Lilly Company 7913 Ridge Road Indianapolis, IN 46240 Phone: 317.253.9607	TACITICAL TACITI		
Sister Patricia McDermott, RSM Sisters of Mercy 7262 Mercy Road Omaha, NE 68124-1704 Phone: 402.393.8225	Member	508-62-1417	12/31/47
Fax: 402.393.6143	7 V	377.56.498	11/30/32
Sister Amata Miller, IHM Marygrove College 8425 McNichols Road Detroit, MI 48221-2599 Phone: 313.927.1200 x1229 Fax: 313.927.1345	Member		

chanofer.lst

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:  CATHOLIC HALTHCASE ALBIT NETWO	nk	•
<del></del>		•.
2. The name and address of the registered agent and office is:		
STACEY MCKENDREE (Name)	98 APR	SECRE
(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	R-8 AMII: 19	FILED TARY OF STATE OF CORPORATIONS
Jockson Ville, F1. 32204 (City/State/Zip)	-	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Starry McKendree 3/12/98.
(Signature) (Date)

Filing Fee: S 35 for Designation of Registered Agent

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	/ / <u></u>
Health care And t Wetwork deposes and says:	
Nearth care ALLT NOW deposes and says	graduation of the second
1) the above named limited liability company has at least two members	
2) the total amount of cash contributed by the member(s) is	\$ 300,000
	c 294549 1
<ol> <li>if any, the agreed value of property other than cash contributed by member(s) is A description of the property is attached and made a part hereto.</li> </ol>	3
4) the amount of cash or property anticipated to be contributed by member(s) is	s 694549
This total includes amounts from 2 and 3 above.  (INITIAL CONTAINEUTION)	SEOR NVISION 98 AP
5) the total amount of cash or property anticipated to be contributed by member(s) is	APR. 8
	NP OR A
The ROAM - ASI. Ry	NHOHS
Signature of a member or authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts	er.
stated herein are true.)	

Filing Fee: \$250.00 for Application and Affidavit -

(a) Computer Equipment + Soltware

V Please note that the confibuted equipment is
not located in Florida. Equipment located in Ploida

not located in Florida. Equipment located in Project.

will be separetely submitted on personel prop. froms.



## Rebecca McDowell Cook Secretary of State

CERTIFICATE OF GOOD STANDING
LIMITED LIABILITY COMPANY

I, REBECCA McDOWELL COOK, SECRETARY OF STATE OF THE STATE & OF MISSOURI, DO HEREBY CERTIFY THAT THE RECORDS IN MY OFFICE AND IN MY CARE AND CUSTODY REVEAL THAT

CATHOLIC HEALTHCARE AUDIT NETWORK, L.L.C.

WAS FILED IN THIS OFFICE ON THE 27TH DAY OF MAY, 1997,
BECAME EFFECTIVE ON THE 27TH DAY OF MAY, 1997, AND IS IN
GOOD STANDING, HAVING FULLY COMPLIED WITH ALL REQUIREMENTS
OF THIS OFFICE.

IN TESTIMONY WHEREOF, I HAVE SET MY HAND AND IMPRINTED THE GREAT SEAL OF THE STATE OF MISSOURI, ON THIS, THE 3RD DAY OF MARCH, 1998.

Secretary of State

