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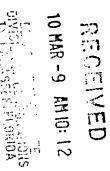
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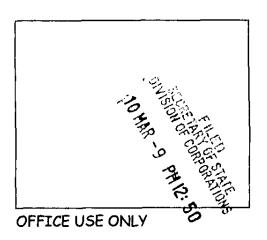
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. KOHR

MAR - 9 2010

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446



WALK-IN

ENTITY NAME:

HEALTH TECH SOLUTIONS GROUP LLC

CK# 4469 FOR \$155.00

PLEASE FILE THE ATTACHED QUALIFICATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

_ CERTIFICATE OF STATUS

Examiner's Initials

COVER LETTER

TO: Registration Section
Division of Corporations

ONAR ONE STATIONS

SUBJECT:	HealthTech Solutions Group, LLC
	(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

	(Name of Person)
Bass, Berry & Sims	
	(Firm/Company)
150 3rd Avenue South, Suite 2800	
	(Address)
Nashville, TN 37201	
,	y/State and Zip Code)
(City or the rest of the concerning this matter, Margaret Alexander	please call:
rther information concerning this matter,	please call:
orther information concerning this matter, Margaret Alexander	please call:at (615) 259-6721
Margaret Alexander (Name of Person) MAILING ADDRESS: Division of Corporations	at (615) 259-6721 (Area Code & Daytime Telephone Number) STREET ADDRESS: Division of Corporations
Margaret Alexander (Name of Person) MAILING ADDRESS: Division of Corporations P.O. Box 6327	at (615) 259-6721 (Area Code & Daytime Telephone Number) STREET ADDRESS: Division of Corporations Clifton Building
Margaret Alexander (Name of Person) MAILING ADDRESS: Division of Corporations	at (815) 259-6721 (Area Code & Daytime Telephone Number) STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle
Margaret Alexander (Name of Person) MAILING ADDRESS: Division of Corporations P.O. Box 6327	at (615) 259-6721 (Area Code & Daytime Telephone Number) STREET ADDRESS: Division of Corporations Clifton Building

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. HealthTech Solul			
(Name of Forei	gn Limited Liability Company; must inclu	de "Limited Llability Company," "L.L.C.," or	'LLC.")
	rs or managing members adopting the alter	e of transacting business in Florida and attach nate name. The alternate name must include "I	
2. Delaware	3		
(Jurisdiction under t company is organize	he law of which foreign limited liability ed)	(FBI number, if applicable)	Printed and the second
4. 12/30/09	5	perpetual	
(Date	e of Organization)	(Duration: Year limited liability company vexist or "perpetual")	will cease to
6. upon filing			E 533
	(Date first transacted business in Plo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)	10 Mar -9 PM 12: 50
7. 105 Westwood P	lace, Suite 300		10
Brentwood, TN 3			-9 PM 12:50
	(Street Address	of Principal Office)	50
8. If limited liabili	ty company is a manager-managed	company, check here	
9. The name and u	sual business addresses of the mana	aging members or managers are as follo	ws:
member is Brlm	Holding Company, 105 Westwood Pla	ce, Suite 300, Brentwood, TN 37027	
			
			
			
the jurisdiction under th	e law of which it is organized. (A photocopy	ays old, duly authenticated by the official having is not acceptable. If the certificate is in a foreign	
translation of the certific	cate under oath of the translator must be subor	ntted.)	
11. Nature of busin	ness or purposes to be conducted or	promoted in Florida: to provide healtho	are
services			·
	Box Davis		
		horized representative of a member. S., the execution of this document constitutes ry that the facts stated herein are true.)	
	Beth Davis, Secretary		
	Typed or printed	name of signee	

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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: HealthTech Solutions Group, LLC				
	le, the alternate name to be used in the state of Florida is:			
2. The name and t	the Florida street address of the registered agent and office are:			
N	RAI Services, Inc.			
_27	731 Executive Park Drive, Suite 4			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			
<u>_w</u>	Veston FL 33331 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 as provided for in Chapter 608, Florida Statutes, NRAI Services, inc.

Eileen Chaddo Signature)
Special Asst. Secretary

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

DAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HEALTHTECH SOLUTIONS GROUP, LLC" IS
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF MARCH, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEALTHTECH SOLUTIONS GROUP, LLC" WAS FORMED ON THE THIRTIETH DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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100257091

DATE: 03-08-10

AUTHENTY CATION: 7855080