

Document Number Only

CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
850-222-1092

DATE: 11/29

Corporation(s) Name

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*****70.00 *****70.00

HealthSouth S.C. of Aventura, Inc.

☒ Profit
☐ Nonprofit

☐ Amendment

☐ Merger

☒ Foreign
☐ ELC

☐ Dissolution
☐ Withdrawal

☐ Mark

☐ Limited Partnership
☐ Reinstatement
☐ UCC ☐ 1 or ☐ 3

☐ UBR
☐ Fictitious Name

☐ Other
☐ Ch. RA

***Special Instructions**

☐ Certified Copy
☐ Parts/amends/mergers ☐ Other-See Above

☐ Photocopies

☐ CUS

☒ Walk in

☒ Pick-up

☐ Will Wait

Please Return Filed Stamped
Copies To:

Carol Clark

Thank You!

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NOV 29 AM 11:59
DIVISION OF CORPORATION

RECEIVED

11/29

**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. HEALTHSOUTH S.C. of Aventura, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "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. Delaware 3. Applied For
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/27/2000 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. One HealthSouth Parkway, Birmingham , Alabama 35243
(Current mailing address)

8. outpatient surgery center
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(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.

C T Corporation System

Dale W. Morris

(Registered agent's signature)

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the filing 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: Richard M. Scrushy

Address: One HealthSouth Parkway

Birmingham, AL 35243

Vice Chairman: n/a

Address: _____

Director: Brandon O. Hale

Address: One HealthSouth Parkway

Birmingham, AL 35243

Director: William T. Owens

Address: One HealthSouth Parkway

Birmingham, AL 35243

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

President: Richard M. Scrushy

Address: One HealthSouth Parkway

Birmingham, AL 35243

Vice President: William W. Horton

Address: One HealthSouth Parkway

Birmingham, AL 35243

Secretary: Brandon O. Hale

Address: One HealthSouth Parkway

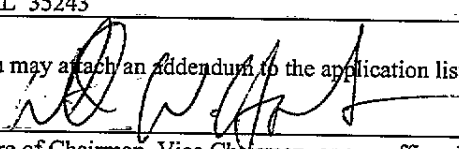
Birmingham, AL 35243

Treasurer: William T. Owens

Address: One HealthSouth Parkway

Birmingham, AL 35243

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)

14. William W. Horton, Vice President

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

FILED
NOV 29 PM 2 39
TALAHASSEE, FLORIDA
SECRETARY OF STATE

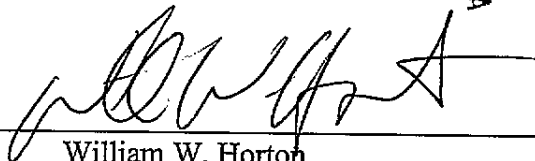
CONSENT TO USE OF NAME

HEALTHSOUTH Corporation, a Delaware corporation, as the sole shareholder of HEALTHSOUTH S.C. of Aventura, Inc., a Delaware corporation, hereby consents to the use of the name, HEALTHSOUTH S.C. of Aventura, Inc., in the State of Florida.

IN WITNESS WHEREOF, the said HEALTHSOUTH Corporation has caused this consent to be executed by its Senior Vice President this 27th day of November, 2000.

HEALTHSOUTH CORPORATION

By



William W. Horton
Senior Vice President

00 NOV 29 PM 2:39
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHSOUTH S.C. OF AVENTURA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2000.


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

FILED
00 NOV 29 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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Edward J. Freel, Secretary of State

AUTHENTICATION: 0816546

DATE: 11-28-00