

F0100000999

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SunHealth Specialty Services, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mary Buckley - Law Dept.
(Name of Person)
Sun Healthcare Group, Inc.
(Firm/Company)
101 Sun Ave NE
(Address)
Albuquerque NM 87109
(City/State and Zip code)

For further information concerning this matter, please call:

600003742386--4
-02/20/01-01015-002
*****70.00 *****70.00

Mary Buckley at (505) 821-3355
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 FEB 20 PM 4:16

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**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. SunHealth Specialty Services, 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. New Mexico 3. 85-0457785
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12.21.98 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 101 Sun Avenue NE, Albuquerque NM 87109
(Principal office address)
- Same as above.
(Current mailing address)
8. Health care services.
(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: CT Corporation System
- Office Address: 1200 S. Pine Island Road
Plantation, Florida 33324
(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.

CT CORPORATION SYSTEM

By: _____

(Registered agent's signature)

Candice Maerz, Assistant Secretary

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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Please See the Attached.

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please See the 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. Michael Berg

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

14. Michael T. Berg, Secretary

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

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SECRETARY OF THE
TALLAHASSEE FLORIDA

SUNHEALTH SPECIALTY SERVICES, INC.

Officers & Directors

Officers:

Robert D. Woltl
101 Sun Avenue NE
Albuquerque, NM 87109

President & CFO

Jennifer Botter
101 Sun Avenue NE
Albuquerque, NM 87109

Vice President and Controller

Matthew G. Patrick
101 Sun Avenue NE
Albuquerque, NM 87109

Vice President and Treasurer

D. Craig Hayes
101 Sun Avenue NE
Albuquerque, NM 87109

Assistant Treasurer

Michael T. Berg
101 Sun Avenue NE
Albuquerque, NM 87109

Secretary

Jeffrey C. Gilmore
101 Sun Avenue NE
Albuquerque, NM 87109

Assistant Secretary

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Directors:

Mark G. Wimer
101 Sun Avenue NE
Albuquerque, NM 87109

Robert D. Woltl
101 Sun Avenue NE
Albuquerque, NM 87109



OFFICE OF THE
PUBLIC REGULATION COMMISSION

CERTIFICATE OF GOOD STANDING AND COMPLIANCE

IT IS HEREBY CERTIFIED THAT:
SUNHEALTH SPECIALTY SERVICES, INC.


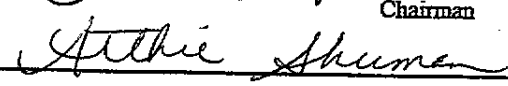
1975291

a corporation organized under the laws of
NEW MEXICO
is duly authorized to transact business in New Mexico, as a
Domestic Profit Corporation, under the
BUSINESS CORPORATION ACT
(53-11-1 to 53-18-12 NMSA 1978)
having filed its Articles of Incorporation DECEMBER 21, 1998
and Certificate of Incorporation issued as of said date.

IT IS FURTHER CERTIFIED that the fees due the Public
Regulation Commission which have been assessed against the
aforesaid corporation, have been paid to date and aforesaid
corporation is in corporate good standing & duly authorized
to transact business as its corporate existence has not been
revoked in New Mexico. This Certificate is not to be
construed as an endorsement, recommendation, or notice of
approval of the corporation's financial condition or
business activities and practices. This certificate of Good
standing and compliance expires: MARCH 15, 2002

Dated: JANUARY 25, 2001

In testimony whereof, the State Public Regulation
Commission of the State of New Mexico has
caused this certificate to be signed by its
Chairman and the seal of said Commission to be
affixed at the City of Santa Fe


Chairman

Bureau Chief