

FO 2000002593

FILED
02 MAY 24 PM 2:41
TALLAHASSEE, FLORIDA

RECEIVED
02 MAY 24 PM 12:49
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

1. MHC/LCA-Florida, Inc.

2. MHC/CSI Florida, Inc.

☒ Profit

☐ Nonprofit

☒ Foreign

☐ Limited Partnership

☐ LLC

☐ Certified Copy

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Amendment

☐ Dissolution/Withdrawal

☐ Reinstatement

☐ Annual Report

☐ Name Registration

☐ Fictitious Name

☐ Photocopies

☐ Call If Problem

☐ Will Wait

☐ Merger

☐ Mark

☐ Other

☐ Change of RA

☐ UCC

☐ CUS

☐ After 4:30

☒ Pick Up

Name

Availability

Document

Examiner

Updater

Verifier

W.P. Verifier

5/24/02

Order#: 5368714

200005610502--4

-05/24/02--01050--005

Ref#: *****70.00 *****70.00

Amount: \$

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

TRANSMITTAL LETTER

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02 MAY 24 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: MHC/LCA Florida, 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:

Wynn Sims
(Name of Person)

Mariner Health Care
(Firm/Company)

One Ravinia Dr., Suite 1500
(Address)

Atlanta, GA 30346
(City/State and Zip code)

For further information concerning this matter, please call:

Wynn Sims at (678) 443-6775
(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

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. MHC/LCA Florida, 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. 02-0537035
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 1-11-02 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. May 13, 2002
(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. One Ravinia Dr., Suite 1500
(Principal office address)

Atlanta, GA 30346
(Current mailing address)

8. Operation of skilled nursing facilities
(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 South Pine Island Rd.

Plantation

(City)

, 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.

Connie Bryan Connie Bryan, Special Asst. Secy.
(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.

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

A. DIRECTORS

Chairman: _____
Address: _____

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS *See attached.*

President: _____
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)

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

Directors, Officers Report

MHC/LCA Florida, Inc.

DIRECTORS

Boyd P. Gentry	Director
Darrel Hager	Director
Stefano M. Miele	Director

OFFICERS

Darrel Hager	President
Boyd P. Gentry	Vice President and Treasurer
Brian Grazzini	Vice President
John Notermann	Vice President
William C. Straub	Vice President and Assistant Treasurer
Darrell Zurovec	Vice President and Assistant Secretary
Stefano M. Miele	Secretary
Bob Bruce	Regional Vice President
John Mangine	Regional Vice President
Wynn G. Sims	Assistant Secretary

All having a business address of:

One Ravinia Drive
Suite 1500
Atlanta, GA 30346

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

PAGE 1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MHC/LCA FLORIDA, 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-SECOND DAY OF MAY, A.D. 2002.

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



3477065 8300

020328144

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1791709

DATE: 05-22-02