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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 120000000195 Phone : (850)521-1000

Fax Number : (850)558-1575

FOREIGN PROFIT QUALIFICATION

TREASURE COAST HEALTH VENTURES, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$70.00 |

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APPLICATION BY MOREIGN 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.

| | Coast Health Ventures, Inc. | | | | | | |
|------------------------------------|---|-----------------|-----------------------------|---|----------------|--------|------|
| | of corporation, must include "INCORPORAT" ""Carp," "Inc," "Co," or "Corp.") | ED, | " "CŌMPA | NY," "CORPORATION," | _ | | |
| (If name una | vailable in Florids, enter alternate corporate na | ime : | ado sted for | the purpose of transacting business in Florida | <u>.}</u> | | |
| 2. Delaware | | 3. | 20-0775 | | | | |
| (State or cour | ntry under the law of which it is incorporated) | | - | (FEI number, if applicable) | _ | | |
| 4. 02/23/20 | 04 | 5. | _ | Perpetual | | | |
| (1 | Date of incorporation) | | (Eligration | Year corp. will cease to exist or "perpetual") | , | | |
| 6. Upon qua | lification | | | _ | | | |
| | nsacted business in Florids. If corporation has (SEE SECTIONS 607.1 | | | | ") | | |
| 7.16049 Bri | or Creek Drive, Del Rey Beach, F | | | | _ | | |
| _ | (Principal office | =ddr | os s) | | _ | | |
| | | | | | _ | | |
| | (Current resiling | addr | v(\$) | | _ | | |
| | | | • | | | | |
| 8 Memitheon | re distribution and service com | 9.63 | ٧ | | _ | | |
| (Pulpe | se(s) of corporation authorized in home state o | r col | untry to be o | carried out in state of Florida) | | | |
| 9. Name and | street address of Fiorids registered agen | ti (| F.O. Box | or Mail Drop Box <u>NOT</u> acceptable) | 芝生 | 04 MAS | |
| Name. | Terry R. Thompson | | | | | 3 | |
| Office Address | : 16049 Brier Creek Drive | | | | CRETAR | 1 | -LJ |
| | | | 271 | Life n n 4 a g | SS 2 | ۵ | |
| | Del Rey Beach (City) | | 100 | (Zip code) | | PH | - 띯드 |
| | (010) | | | (0.5 2422) | 2.7 | | |
| 10. Registeres | d agent's acceptance: | | | | | က် | |
| designated in I Turther agree t | amed as registered agent and to accept se his application, I hereby accept the appole o comply with the provisions of all statute lier with and accept the obligations of my | MEDIN S. PAL | ent as regi lative to th | stered agent and agree to uct in this cape se proper and complete performance of m | icity. T | 173 | |
| बर ा १ कार जिल्ला | | ge (rit) | minera see i fil | | | | |
| | Terry R. Thompson | | | | | | |
| | (Registered agent's signatu | re) | | | | • | |

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

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

under the law of which it is incorporated.

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBBY CERTIFY "TREASURE COAST HEALTH VENTURES, 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 EIGHTH DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TREASURE COAST HEALTH VENTURES, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2004.

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

Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 2975415

DATE: 03-08-04

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