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To:

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195

Phone

(850) 521-1000

Fax Number

(850) 558-1575

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FOREIGN PROFIT QUALIFICATION

MSO PHYSICIANS, P.C.

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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.

REGIOIBICA N	Menor Cort Civerion 10 minute	T DODING ON THE UNITED OF L'HOMON.	
1. MSO PHYSIC (Enter name of "Inc.," "Co.," "	TANS, P.C. *corporation; must include "INCORPORATI Corp," "Inc," "Co." or "Corp.")	ED," "COMPANY," "CORPORATION,"	
(If name unava	ilable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business	in Plorida)
2, MICHIGAN		3. 35-2200761	
(State or countr	y under the law of which it is incorporated)	(PEI number, if applicable)	
4. 3/14/2003		5. PERPETUAL	
	te of incorporation)	(Duration: Year corp. will cease to exist or ")	perpotual")
6. UPON CUALI	FICATION		·
(Date first trans	acted business in Florida. If corporation has	not transacted business in Florida, insert "upon qu 501, 607.1502 and 817.155, F.S.)	alification.")
7.2333 WAUKE	SAN ROAD, SUITE 150, BANNOCKBUI	RN, IL 60015	
	(Principal office		
2333 WAUKE			
	(Current mailing	address)	
# SEE EXHIBI	T A ATTACHED HERETO AND MADE	PART HEREOF.	4
(Purpose	(s) of corporation authorized in home state of	r country to be carried out in state of Florida)	- P - P - P - P - P - P - P - P - P - P
9. Name and st	reet address of Florida registered agen	it: (P.O. Box or Mail Drop Box NOT acceptal	ble)
Name:	Corporation Service Company		
1,2891,500,			
Office Address:	1201 Have Street	<u> </u>	
_,		_ _ .	
		, Florida <u>32301</u>	- - -
	(City)	(Zip code)	Jan 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Having been na designated in th further agree to	is application, I hereby accept the appoint comply with the provisions of all statute	rvice of process for the above stated corporat intment as registered agent and agree to act be es relative to the proper and camplete perform	r this capacity. I
ana i am jamili	ar with and accept the obligations of my	harman as teknicien akeur	
	Corporation Service Company (Recistored agent's signatu) Iral	
	f Vedivioted signify a 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.

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

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A. DIRECTORS	
Chairman: JAMES SAPALA, M.D., 2333 WAUKED	AN ROAD, SUITE 150, BANNOCKBURN, IL 60015
Address:	
	, <u></u>
fice Chairman:	
Address:	
	N ROAD, SUITE 150, BANNOCKBURN, IL 60015
ddress:	
and the contract of the contra	
	
. OFFICERS	decision in the second
•	
resident: JAMES SAPALA, N.D.	<u></u>
ddress: 2333 WAUKEGAN ROAD, SUITE 150, BA	NNOCKBURN, IL 60015
··	
ddress:	
	·
coretary: JAMES SAPALA, M.D.	
ddress: 2333 WAUKEGAN ROAD, SUITE 150, BA	NNOCKBURN, IL 60015
ressurer: JAMES SAPALA, M.D.	-
Adress: 2333 WAUKEGAN ROAD, BUITE 150. BA	WNOCKBURN, II. 60015
OTE: If necessary, you may attach an adday tium to	the application listing additional officers and/or directors.
3. Infama	
(Signature of Director or Officer listed	in number 12 of the application)
4. JAMES SAPALA, M.D., PRESIDENT	
Civined or orinted name and co	anaciny of narron signing anniidation)

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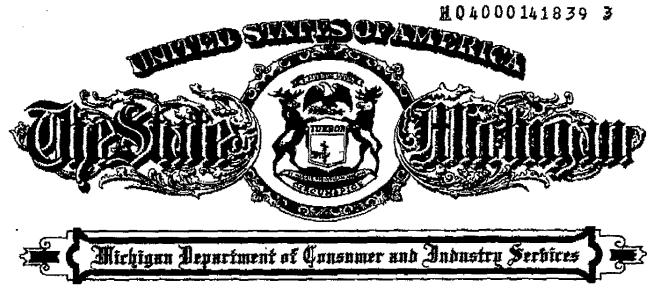
EXHIBIT A TO THE APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

MSO PHYSICIANS, P.C.

TO OWN, OPERATE AND MAINTAIN AN ESTABLISHMENT FOR THE STUDY, DIAGNOSIS AND TREATMENT OF HUMAN AILMENTS AND INJURIES, WHETHER PHYSICAL OR MENTAL, AND TO PROMOTE MEDICAL, SURGICAL AND SCIENTIFIC RESEARCH AND KNOWLEDGE, PROVIDED THAT MEDICAL OR SURGICAL TREATMENT CONSULTATION OR ADVICE MAY BE GIVEN BY EMPLOYEES OF THE CORPORATION ONLY IF THEY ARE LICENSED PURSUANT TO THE MEDICAL PRACTICE ACT.

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Lansing, Michigan

This is to Certify That

MSO PHYSICIANS, P.C.

was validly incorporated on March 14, 2003, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full feith and credit given it in every court and office within the United States.

In testimony whereof, I have hereunto set my hand, In the City of Lensing, this 7th day of July, 2004.

Bureau of Commercial Services # 0 40 00 14 18 3 9 3 RX TIME 07/08 '04 11:56