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TRANSMITTAL LETTER

2004 JUL 29 P 2: 10

TO: Registration Section **Division of Corporations** SUBJECT: P5 e.Health 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: John Eddington (Name of Person) P5 e.Health Services, Inc. (Firm/Company) 2455 East Parleys Way, Ste 300 (Address) Salt Lake City, Utah 84109-1217 (City/State and Zip code) For further information concerning this matter, please call: at (801 John Eddington (Area Code & Daytime Telephone Number) (Name of Person) STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations 409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314 Enclosed is a check for the following amount: **□** \$70.00 Filing Fee **Ø** \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FO	E WITH SECTION 607.1303, FLORIDA'S PREIGN CORPORATION TO TRANSACT	TATUTES, THE FOLLOWING IS SUBMITTED TO TO BUSINESS IN THE STATE OF FLORIDA.
l. P5 e.Health S		2011 JUL 29 P 2: 1
(Enter name of o	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
NA		
(If name unavai	lable in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
Nevada		87-0686776
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
12/05/2001	5.	Perpetual
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
. <u>N/A</u>		
	(Date first transacted business i	n Florida, if prior to registration)
		502, F.S., to determine penalty liability)
. 2455 East Parl	eys Way, Ste 300 Salt Lake City, Utah 84	
	(Principal office add	•
2455 East Parl	eys Way, Ste 300 Salt Lake City, Utah 84	
	(Current mailing add	ress)
To conduct the	business of insurance as a Third Party Ac	lministrator
(Purpose(s) of corporation authorized in home state or co	ountry to be carried out in state of Florida)
. Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)
Name:	CT Corporation System	
Office Address:	1200 South Pine Island Road	
	Plantation	
	(City)	, Florida <u>33324</u> (Zip code)
	· -	(Zip code)
	gent's acceptance:	and the second s
raving been nam lesignated in this	ea as registerea agent and to accept servi application, I hereby accept the appoints	ce of process for the above stated corporation at the place ment as registered agent and agree to act in this capacity. I
urther agree to c	omply with the provisions of all statutes r	elative to the proper and complete performance of my duties,
nd I am familiai	with and accept the obligations of my po	sition as registered agent.
*****		PETER F. SOUZA ASSISTANT SECRETARY
=	(Registered agent's signature)	
	(registered agent 3 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:

A. DIRECTORS	Pare a .	
Chairman: Sherif Wadie Abdou	- I-II ED	
Address: 2604 Ragusa Court		
Henderson, Nevada 89502	101 JOL 29 P 2: 12	
Vice Chairman: Michael Lee Reed	TATALON	
Address: 2423 Antler Point Drive		
Las Vegas, Nevada 89123		
Director: Brian Ephraim Peterson		
Address: 1800 East 3990 South		
Salt Lake City, Utah 84124		
Director: Amir Shareef Bacchus		
Address: 10017 Laurel Springs		
Las Vegas, Nevada 89134		
B. OFFICERS		
President: Sherif Wadie Abdou		
Address: 2604 Ragusa Court .		
Henderson, Nevada 89052		
Vice President:		
Address:	·	
Secretary: Brian Ephriam Peterson		
Address: 1800 East 3990 South Salt Lake City, Utah 84124		
Treasurer: Michael Lee Reed		
Address: 2423 Antler Point Drive Las Vegas, Nevada 89123		
NOTE: If necessary, you may attach an addendum to the application listing add		
(Signature of Director or Officer listed in number 12 of the application)		
14. <u>Brian E. Peterson. Secretary/Executive Dia</u> (Typed or printed name and capacity of person signing a	rector application)	



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **P5 E.HEALTH SERVICES**, **INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 5, 2001, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on July 12, 2004.

DEAN HELLER

Secretary of State

Certification Clerk