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**FOREIGN PROFIT QUALIFICATION**

Healthfield Operating Group, Inc.

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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. HEALTHFIELD OPERATING GROUP, INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. DELAWARE 3. 36-4425473  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 12/8/04 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. 6686 Powers Ferry Rd. - Suite 328; Atlanta, GA 30339  
(Principal office address)
- SAME  
(Current mailing address)
8. Operating Company of 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: NRAI Services, Inc.  
Office Address: 526 E. Park Avenue  
Tallahassee, Florida 32301  
(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.

NRAI Services, Inc.

By: Stephanie Thomas, 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.

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

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TALLAHASSEE, FLORIDA

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**A. DIRECTORS**Chairman: Rodney D. WindleyAddress: 6666 Powers Ferry Road - Suite 328Atlanta, GA 30339~~Assistant Secretary:~~ Director: Gary E. SnyderAddress: 3290 Northside Parkway - Suite 400Atlanta, GA 30327Director: H. Anthony StrangeAddress: 6666 Powers Ferry Road - Suite 328Atlanta, GA 30339Director: John T. Ennis, Sr.Address: 6666 Powers Ferry Rd. - Suite 328Atlanta, GA 30339**B. OFFICERS**President: H. Anthony StrangeAddress: 6666 Powers Ferry Rd. - Suite 328Atlanta, GA 30339~~Assistant Secretary:~~ Assistant Secretary: Gary E. SnyderAddress: 3290 Northside Parkway - Suite 400Atlanta, GA 30327Secretary: John T. Ennis, Sr.Address: 6666 Powers Ferry Rd. - Suite 328; Atlanta, GA 30339Treasurer: Cynthia L. LumpkinAddress: 6666 Powers Ferry Rd. - Suite 328; Atlanta, GA 30339

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. ☒ 

(Signature of Director or Officer listed in number 12 of the application)

14. Gary E. Snyder, Assistant Secretary

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

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# Delaware

*The First State*

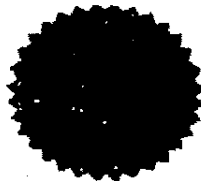
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHFIELD OPERATING GROUP, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JANUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEALTHFIELD OPERATING GROUP, INC." WAS INCORPORATED ON THE EIGHTH DAY OF DECEMBER, A.D. 2004.

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

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*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State  
AUTHENTICATION: 3615660

DATE: 01-13-05

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