

FOS 0000 02767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

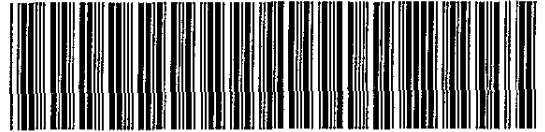
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 5 11 30 AM '05
OFFICE OF STATE
SECRETARY

FOS-2767
ok

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: National Renal Institutes, 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:

Carol A. Hicks, Paralegal
(Name of Person)

Bone McAllester Norton PLLC
(Firm/Company)

511 Union Street, Suite 1600
(Address)

Nashville, Tennessee 37219
(City/State and Zip code)

For further information concerning this matter, please call:

Carol Hicks at (615) 687-2768
(Name of Person) (Area Code & Daytime Telephone Number)

RECEIVED
JUN 17 5 14 AM '91
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. National Renal Institutes, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 20-2694671 (State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3-3-2005 5. perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 511 Union Street, Suite 1800 (Principal office address)

Nashville, Tennessee 37219 (Current mailing address)

8. Develop hospitals focused on treatment of renal and heart failure and heart transplan: (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 NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324 (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.

(Registered agent's signature)

Jennifer F. Aulman Assistant Secretary

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:

2005 MAY -5 PM 1:11 SECRETARY OF STATE TALLAHASSEE FL

A. DIRECTORS

Chairman: Jerome S. Tannenbaum, M.D., Ph.D.

Address: 511 Union Street, Suite 1800

Nashville, Tennessee 37219

Vice Chairman: _____

Address: _____

Director: Steve Harrison

Address: 511 Union Street, Suite 1800

Nashville, Tennessee 37219

Director: Judy Lefkovitz

Address: 511 Union Street, Suite 1800

Nashville, Tennessee 37219

B. OFFICERS

President: Jerome S. Tannenbaum, M.D., Ph.D.

Address: 511 Union Street, Suite 1800

Nashville, Tennessee 37219

Vice President: _____

Address: _____

Secretary: Judy Lefkovitz

Address: 511 Union Street, Suite 1800, Nashville, TN 37219

Treasurer: _____

Address: _____

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. Jerome S. Tannenbaum, M.D., Ph.D., Chairman

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

SECRET
2006-11-05 AM 8:41
SECRETARY OF THE
TENNESSEE

5433 0304
Delaware

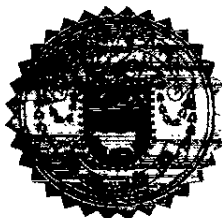
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NATIONAL RENAL INSTITUTES, 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 FOURTEENTH DAY OF APRIL, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NATIONAL RENAL INSTITUTES, INC." WAS INCORPORATED ON THE THIRD DAY OF MARCH, A.D. 2005.

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



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050303651

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3813706

DATE: 04-14-05