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Florida Department of State
Division of Corporations
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DIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

Atlantic Healthcare Center, Inc.

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAY 27 AM 11:04

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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. Atlantic Healthcare Center, 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

(State or country under the law of which it is incorporated)

3. 56-2514811

(FEI number, if applicable)

4. May 13, 2005

(Date of incorporation)

5. Perpetual

(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. 7125 Thomas Edison Drive, Suite 225, Columbia, Maryland 21046

(Principal office address)

Same as Above Address

(Current mailing address)

8. Nursing Home

(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

(City)

Florida 33324

(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.

CT Corporation System

By: Connie Brown

Special Asst. Sec.

(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:

FILED 9-311/05 CT System Office

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05 MAY 27 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORSChairman: Timothy F. NicholsonAddress: 7125 Thomas Edison Drive, Suite 225Columbia, Maryland 21046

Vice Chairman: _____

Address: _____

Director: _____

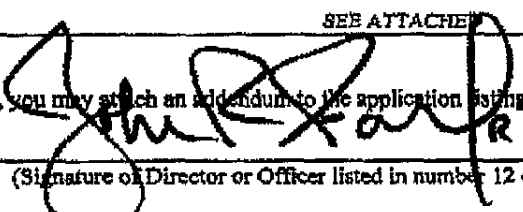
Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: SEE ATTACHEDAddress: SEE ATTACHEDVice President: SEE ATTACHEDAddress: SEE ATTACHEDSecretary: SEE ATTACHEDAddress: SEE ATTACHEDTreasurer: SEE ATTACHEDAddress: SEE ATTACHED

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. John R. Fallon, Jr. Secretary
(Typed or printed name and capacity of person signing application)FILED
05 MAY 27 AM 11:04
SECURITIES DIVISION
TALLAHASSEE, FLORIDA

ATLANTIC HEALTHCARE CENTER, INC.
CORPORATE OFFICERS AND DIRECTOR

EIN: 56-2514811

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
Timothy F. Nicholson	President, Sole Director	7125 Thomas Edison Drive, Suite 225, Columbia, Maryland 21046
John B. Poole	Executive Vice President	7125 Thomas Edison Drive, Suite 225, Columbia, Maryland 21046
Matthew F. Auman	Senior Vice President	7125 Thomas Edison Drive, Suite 225, Columbia, Maryland 21046
Timothy J. Trybus	Senior Vice President	7125 Thomas Edison Drive, Suite 225, Columbia, Maryland 21046
John R. Fallon, Jr.	Secretary	125 West 55th Street, New York, New York 10019

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TALLAHASSEE, FLORIDA

FROM CORPORATION TRUST WILM TEAM #2

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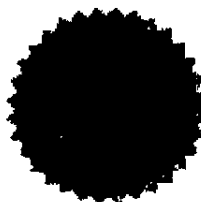
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATLANTIC HEALTHCARE CENTER, 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 TWENTY-SIXTH DAY OF MAY, A.D. 2005.

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



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3969636 8300

AUTHENTICATION: 3908845

050440553

DATE: 05-26-05