

F07000002871

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 MAY 31 PM 2:52

APPROVED
AND
FILED

B. McKnight JUN 01 2007

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Navigator Health Management Solutions, 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:

Mark Eaton

(Name of Person)

Navigator Health Management Solutions, Inc.

(Firm/Company)

1000 Corporate Centre Drive, Suite 100

(Address)

Franklin, TN 37067

(City/State and Zip code)

For further information concerning this matter, please call:

Mark Eaton

(Name of Person)

at (615) 771-0800

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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. Navigator Health Management Solutions, 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. Tennessee

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

3. 32-0044095

(FEI number, if applicable)

4. 11-27-2002

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 5-1-2003

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

7. 1000 Corporate Centre Drive, Suite 100, Franklin, TN 37067

(Principal office address)

1000 Corporate Centre Drive, Suite 100, Franklin, TN 37067

(Current mailing address)

8. Medical Billing Service

(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: Rick Dunbar

Office Address: 174 East Cory Drive

Edgewater

(City)

, Florida 32141

(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.

 5-24-07
(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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED

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

A. DIRECTORS

Chairman: J. Mark Eaton

Address: 1000 Corporate Centre Drive, Suite 100
Franklin, TN 37067

Vice Chairman: J. Stephen Eaton

Address: 5445 Triangle Parkway, Suite 260
Norcross, GA 30092

Director: Debbie Eaton

Address: 1000 Corporate Centre Drive, Suite 100
Franklin, TN 37067

Director: _____

Address: _____

B. OFFICERS

President: J. Mark Eaton

Address: 1000 Corporate Centre Drive, Suite 100
Franklin, TN 37067

Vice President: J. Stephen Eaton

Address: 5445 Triangle Parkway, Suite 260
Norcross, GA 30092

Secretary: Debbie Eaton

Address: 1000 Corporate Centre Drive, Suite 100, Franklin, TN 37067

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. Mark Eaton CEO

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

APPROVED
AND
FILED
07 MAY 31 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Secretary of State
Division of Business Services
312 Eighth Avenue North
6th Floor, William R. Snodgrass Tower
Nashville, Tennessee 37243

ISSUANCE DATE: 05/11/2007
REQUEST NUMBER: 07131546
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 11/27/2002
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0437412
JURISDICTION: TENNESSEE

TO:
TRISTA FRENCH
1000 CORP CENTRE DR
STE 100
FRANKLIN, TN 37067

REQUESTED BY:
TRISTA FRENCH
1000 CORP CENTRE DR
STE 100
FRANKLIN, TN 37067

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"NAVIGATOR HEALTH MANAGEMENT SOLUTIONS, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED
WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

APPROVED
AND
FILED
07 MAY 31 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/11/07

FROM:
NAVIGATOR HEALTH MANAGEMENT SOLUTIONS
1000 CORPORATE CTR
DRIVE STE 100
FRANKLIN, TN 37067-0000

RECEIVED: FEES \$20.00 \$0.00
TOTAL PAYMENT RECEIVED: \$20.00

RECEIPT NUMBER: 00004180273
ACCOUNT NUMBER: 00424666



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE