## Florida Department of State

Division of Corporations Public Access System

#### Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000236792 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5926

RECEIVED OCT 1 5 2008

## FOREIGN PROFIT/NONPROFIT CORPORATION

Samaritan Care Hospice of Polk, Highlands, and Hardet, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	07
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

OCT 16 2008 D.A. WHITE

https://efile.sunbiz.org/scripts/efilcovr.exe

10/15/2008

# 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.

"Ino.," "Co.," "Corp," "Ine," "Co.," or "Corp.")	)," "COMPANY," "CORPORATION,"
OF THE STATE OF TH	
(If name unavailable in Florida, enter alternate corporate nam Delaware	applied for the purpose of transacting pushess in Floriday
State or country under the law of which it is incorporated)	(FEI number, if applicable)
10/14/2008	Perpetual
(Dute of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
Upon filing of this application	
(SEE SECTIONS 607.1501 & 607.	in Floride, if prior to registration) 1502, F.S., to determine penalty liability)
8 Cadillac Drive, Suite 130, Creekside Crossing, Brontwood,	
(Principal office ad	idress)
(Current mailing ad	(Arross)
To engage in any lawful acts authorized under the laws of the	State of Florida.
(Purpose(s) of corporation authorized in home state or	country to be carried out in state of Florida)
	O Day MOT consetable)
Name and street address of Florida registered agent: (P.	O. Box NO I acceptable)
Name and street address of Florida registered agent: (P.  Or Corporation System	O. Box NOT acceptable)
Name: CT Corporation System	
CT Compration System	———
Name: CT Corporation System	

- 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

2003 OCT 15 A 10: 36

A. DIRECTORS	TARY OF CYSTE
Chairman: please see attached	STORETARY OF STATE
Address:	·
Vice Chairman:	
Address:	
Director:	
Address;	
Director:	
Address:	
B. OFFICERS President: please see attached	
Address:	
Vice President:	
Address:	· ·
Scoretary:	
Address:	
Audress:	
NOTE: If geoessary, you may attach an addendum to the	application listing additional officers and/or directors.
(Signature of Director or Officer lis	ted in number 12 of the application)
4. David Andrews, CFO and Secretary	
(Typed or printed mains and capac	sity of person signing application)

## FILED

#### Directors:

Bryan Cressey 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

James A. Deal 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 87027

Merrick Axel 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

Peter Ehrich 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

John W. Cline 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

#### Officers:

James A. Deal, Chief Executive Officer 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

David Andrews, Chief Financial Officer and Secretary 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

John W. Cline, President of Business Development 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027 2091 OCT 15 A 10: 36

CECRETARY OF STATE ALLAHASSEE, FLORIDA

# FILED

Robert S. Holder, Senior Vice President of Operations 8 Cadillac Drive, Suite 130 Creekside Crossing Brentwood, TN 37027

2008 OCT 15 A 10: 36

SEURETARY OF STATE

# Delaware

PAGE :

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SAMARITAN CARE HOSPICE OF POLK, HIGHLANDS, AND HARDEE, 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 FIFTEENTH DAY OF OCTOBER, A.D. 2008.

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



4611687 8300

081040235

You may verify this certificate online at cosp. delaware. gov/authves. shiml

Warriet Smith Hindron

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6912773

DATE: 10-15-08