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PS 10/25/00

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Zenth Healt	heave Systems Inc.
Name of corpora	ntion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact but	
Please return all correspondence concerning this m	atter to the following:
DAWN STEIN	1BERG
Nam	e of Person
Athena Hear	Ithcare Management
	Company
2416 Nath At	lantic Blvd.
A	Address
Fort Lander	ate and Zip code athenadrs. com sed for future annual report notification)
City/Sta	ate and Zip code
d. Steinberg	(a) athenadrs. com
E-mail address: (to be	sed for future annual report notification)
For further information concerning this matter, plea	ase call:
DAWN STEINBERG at (rea Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
\$70.00 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

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. Zenith Heathcare Systems 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. Virginia 3. 27-3520273 (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. September 22, 2010 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2416 North Atlantic Blvd, Ft Lauderdale, FL 33305 (Principal office address) 2416 North Atlantic Blvd, Ft Lauderdale, FI 33305 (Current mailing address) Medical group management
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street	t address of Florida registered agent: (P.O.	. Box NOT acceptable)			
Name:	DAWN STEINBERG		35.0	***	
Office Address:	2416 North Atlanti	cBIVd.		130	<u></u>
	Fort Lauderdale	, Florida 33305		22	E
	(City)	(Zip code)	11 co	2	Ö
10 Registered ag	ent's accentance	·	会は	Ņ	

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.

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:
A. DIRECTORS
Chairman: Steven Lopez
Chairman: Steven Lopez Address: 911 Et, wan Park Street
Charleston SC 29492
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Steven Lope 2
President: Steven Lope 2 Address: 911 Etiwan Park Street
Charleston, Sc 29492
Vice President: DAWN STEINBERG
Address: 2416 North Atlantic Blvd.
Ft Landerdale, Fla 33305
Secretary: TAWN STEINBERG
Address: (see above)
Address: (See above) Treasurer: DAWN STEINBERG
Address: (See above)
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Paun Steinberg Signature of Director or Officer
Signature of Deector or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
14. DAWN STEINBERG
(Typed or printed name and capacity of person signing application)

Commonwealth & Birginia



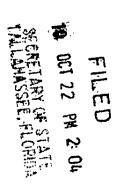
State Corporation Commission

I Certify the Following from the Records of the Commission:

ZENITH HEALTHCARE SYSTEMS, INC. is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is September 22, 2010.

Nothing more is hereby certified.





Signed and Sealed at Richmond on this Date: October 15, 2010

Joel H. Peck, Clerk of the Commission