# Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (853)205-8842 Fax Number : (853)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

### FOREIGN PROFIT/NONPROFIT CORPORATION Prospect Medical Holdings, Inc.

Certificate of Status	1
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Corporate Filing Menu

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9/8/2015

9/8/2015 4:44:26 PM From: To: 8506176383(-2/6)

4,

# **COVER LETTER**

то:	Registration So Division of Co				
SUBJ	ECT:	Prosp	ect Medical	Holdings, Inc.	
		Name of	corporation	- must include suffix	
Dear S	Sir or Madam:				
"Certi	ficate of Existen	tion by Foreign Corp ce," or "Certificate of gn corporation to tran	Good Star	iding" and check are si	uct Business in Florida." Ibmitted to register the
Please	return all corres	pondence concerning	this matter	to the following:	
				eral Counsel	
			Name of	Person	
		Prosp	ect Medical	Holdings, Inc.	
		<del>\</del>	Firm/Com	pany	
_		10780 San	ıta Monica E	Soulevard, Suite 400	
			Addre	:55	
		·	Los Angeles	. CA 90025	
			=	nd Zip code	
				peeimedical.com	
		E-mail address: (t	o be used t	or future annual report	notification)
For fur	ther information	concerning this matte	er, please c	alt:	
Ellen Shin, Esq.		, 310	10 943-4500  Code Daytime Telephone Number		
	Name of Perso	n at	Area Code	Daytime Tele	phone Number
Enclos	Registration Se Division of Col Clifton Buildin 2661 Executive Tallahassee, Fl	rporations g : Center Circle	t:	MAILING A Registration S Division of C P.O. Box 632 Tallahassee. I	Section Forporations 7
	.00 Filing Fee	S78.75 Filing Fo	e & 🗆	\$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.

	corporation; must include "INCORPORATED," "(Corp." "Inc," "Co." or "Corp.")	COMPANY," "CORPORATION,"	
(16 mana unavail	able in Claride, output alternate composite name ade	pted for the purpose of transacting business in Florida)	<del>.</del>
	Delaware	pred for the purpose of transacting desiness in Florida,	,
(State or count	ry under the law of which it is incorporated)	(FEI munber, if applicable)	_
N	- fay 14, 1999	Perpetual	
(Date	of incorporation)	(Date of duration, if other than perpetual)	_
			_
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502		
	10780 Santa Monica Boulevard, Suit	e 400, Los Angeles. CA 90025	
	(Principal	ffice address)	_ ^
	(Current mailing a	ddress, if different)	
Name and <u>stre</u>	et address of Florida registered agent: (P.O. E	Box NOT acceptable)	
Name:	C T Corporation System	<u> </u>	r is
ice Address:	1200 South Pine Island Road	<del></del>	11. 11.
	Plantation	Florida 33324	
	(City)	(Zip code)	

further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I um familiar with and accept the obligations of my position as registered agent.

C T Corporation System Jayna Nickell Asst. Secretary (Registered agent's signature)

10. 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.

9/8/2015 4:44:26 PM From: To: 8506176383( 4/6 )

11. Name	es and business addresses of officers and/or directors:			
A. DIRE				
Chairman:	Samuel Lee			_
Address:	10780 Santa Monica Boulevard, Suite 400			_
<u> </u>	Los Angeles, CA 90025			_
Vice-Chair	man:			-
Address: _				_
_				_
Director:	See attached page.			_
Address:				_
•				-
Director:				_
•				-
74441¢33				-
B. OFFI	CFRS			-
President:	Chief Executive Officer: Samuel Lee	226	29	
Address:	10780 Santa Monica Boulevard, Suite 400		3S C	- _77
	Los Angeles, CA 90025	· · · · · · · · · · · · · · · · · · ·	1	
Vice Presid	Mitchell Lew, M.D.		_ <u>=</u> _	
Address:	600 City Parkway West, Suite 800	الرواد المراد ا	7.	_
-	Orange, CA 92868	<u> </u>	<b>52</b>	
Secretary:	Ellen Shio, Esq.			_
Address:	10780 Santa Monica Boulevard, Suite 400, Los Angeles, CA 90025			_
Treasurer:	& Chief Financial Officer: Steve Aleman			_
Address:	10780 Santa Monica Boulevard, Suite 400, Los Angeles, CA 90025			_
-	If necessary, you may attach an addendum to the application listing additional officers and/or dir	rectors.		
	Zin D			
The office are true ar	Signature of Diffetor or Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts and that he or she is aware that false information submitted in a document to the Department of S gree felony as provided for in s.817.155, F.S.			_
	Ellen Shin, Esq., Secretary & General Counsel			_
	(Typed or printed name and capacity of person signing application)			_

Section 11.A. (Directors) continued:	
Director: <u>Jeereddi A. Prasad, M.D.</u>	_
Address: <u>c/o ProMed Health Care Administrators</u>	
600 City Parkway West, Suite 800	_
Orange, CA 92868	
Director: <u>John Baumer</u>	
Address: <u>c/o Leonard Green &amp; Partners, L.P.</u>	_
11111 Santa Monica Boulevard Suite 2000	
Los Angeles, CA 90025	-
Director: Michael S. Solomon	_
Address:c/o Leonard Green & Partners, L.P.	
11111 Santa Monica Boulevard Suite 2000	-
Los Angeles, CA 90025	
Director: Alyse Wagner	
Address: <u>c/o Leonard Green &amp; Partners, L.P.</u>	
11111 Santa Monica Boulevard Suite 2000	-
Los Angeles, CA 90025	

FILED 2015 SEP -8 MM 7: 52 127 SEP -8 MM 7: 52

# Delaware

# The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROSPECT MEDICAL HOLDINGS, 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 TWELFTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FORTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

2336046 8300

151164962

DATE: 08-12-15

Jeffrey W. Bullock, Secretary of State

AUTHENTACATION: 2639199

You may verify this certificate online at corp. dolaware.gov/authver.shtml