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COVER LETTER

	egistration S vivision of Co								
SUBJEC	Health F	Forum, Inc.							
SCHOLC		Name	of corporation	- must i	nclude suffix				
Dear Sir o	or Madam:								
"Certifica	ite of Existen	ation by Foreign Co ce," or "Certificate gn corporation to t	e of Good Star	nding" ar	nd check are sub	ct Business i mitted to reg	n Florid gister the	a,"	
Please ret	urn all corres	spondence concern	ing this matte	r to the f	ollowing:				
Brenda Ar	nthony								
			Name of	Person					
Central Licensing Bureau					T SS	<u>5</u>	.1		
Firm/Company				ESE	>				
1501 N. U	1501 N. University, Suite 550								
			Addr	ess				£	1
Little Rocl	k, AR 72207						当の	VM 10: 54	C
			City/State a	ınd Zip c	ode		· SE	Ö	
solutions@	@aha.org						25.4	- <u>-</u>	
		E-mail addres	s: (to be used	for futur	e annual report i	notification)			
For furthe	er informatio	n concerning this r	natter, please	call:					
Brenda Ar	nthony - CLB		501	664-	8044				
N	Name of Pers	on	Area Coo	le	Daytime Telep	hone Numbe	er		
Ç.	TDEET/CO	HDIED ANNDES	:c.		MAILING A	nndess.			
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section							
Division of Corporations Division of Corp		•							
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314								
	allahassee, F				rananassee, r	L 32314			
Enclosed	is a check fo	r the following am	ount:						
570.00	0 Filing Fee	□ \$78.75 Filir Certificate	-		5 Filing Fee & ied Copy		Filing Incate of Fied Cop	Status	&



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

July 19, 2016

BRENDA ANTHONY 1501 N UNIVERSITY SUITE 550 LITTLE ROCK, AR 72207

SUBJECT: HEALTH FORUM, INC. Ref. Number: W16000049873



We have received your document for HEALTH FORUM, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 716A00015

7/29/16-Agent consent attached. Please accept for resubmission. As Anthon

JUL 2 6 2016 CLB

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.

Health Forum, I	Inc.		
	orporation; must include "INCORPO corp," "Inc," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION,"	,
(If name unavaila	able in Florida, enter alternate corpor	ate name adopted for the purpose of transacting	business in Florida)
2. Illinois		3. 36-4143432	
(State or countr 03/19/1997	y under the law of which it is incorpo	orated) (FEI number, if appl	
(Date	(Date of incorporation) 5. (Date of duration, if other that		an perpetual)
6. Upon Qualificat	tion		
155 N. Wacker D		business in Florida, if prior to registration) 1 & 607.1502, F.S., to determine penalty liability)
7. 133 N. Wacker B	Tive, outer 400, Officiago, 1D 00000	(Principal office address)	_ - ·
		(Timelpai office address)	
·	(Curi	rent mailing address, if different)	SEC
	et address of Florida registered ag Corporation Service Company	gent: (P.O. Box <u>NOT</u> acceptable)	FILED AND STATE AHASSEE, FLORIDA AHASSEE, FLORIDA
Name: Office Address:	1201 Hays Street		ESTA OF
	Tallahassee	, Florida	24 24 Z
	(City)	(Zip code)	
Having been nam designated in this further agree to c duties, and I am f	application, I hereby accept the comply with the provisions of all familiar with and accept the obligation. Corpora	cept service of process for the above stated appointment as registered agent and agree statutes relative to the proper and complete gations of my position as registered agent. tion Service Compa	e to act in this capacity.
В <u>у:</u>	- INACA C	agistared agent's signature)	
	(R	egistered 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.

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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.

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9. 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.

Corporation Service Company

By:

(Registered agent's signature)

Ashley isbert

(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.

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

A. DIRI	ECTORS				
· Chairman	William D. Petasnick				
Address:	180 E. Pearson Street, Unit 4801				
	Chicago, IL 60611				
Vice Chai	Mone man:				
Address:		,			
_					
· Director:	Neil J. Jesuele				
Address:	155 N. Wacker Drive				
	Chicago, IL 60606				
* Director:	Maryjane Wurth				
Address:	155 N. Wacker Drive, Suite 400	35 55			
	Chicago, IL 60606				
B. OFF	CERS	WSSW WASA			
- President:	Maryjane Wurth				
Address:	155 N. Wacker Drive, Suite 400	ST A			
	Chicago, IL 60606	DA St			
·Vice Presi	dent: Amy Goble				
Address:	155 N. Wacker Drive, 4th Floor				
	Chicago, IL 60606				
· Secretary:	Susan Solomon				
Address:	155 N. Wacker Drive, Suite 400, Chicago, IL 60606				
*Treasurer:	John Evans				
Address:	155 N. Wacker Drive, Suite 400, Chicago, IL 60606				
NOTE:	f necessary, you may attach an addendum to the application listing additional officer	rs and/or directors.			
12	Signature of Director or Officer				
are true a	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms to that he or she is aware that false information submitted in a document to the Depagree felony as provided for in s.817.155, F.S.	itat tile iacis statea nerem			
13. Mary	jane Wurth, President/Director				
	(Typed or printed name and capacity of person signing application)				

Health Forum, Inc. **Additional Directors**

Rhonda Anderson

1400 South Dobson Road Mesa, AZ 85202

David L. Bernd

6015 Poplar Hall Drive Suite 300

Norfolk, VA 23502

Darren Black

222 Berkeley Street, 18th Floor Boston, MA 02138

Jeanette G. Clough

330 Mount Auburn Street Cambridge, MA 02138

Teri G. Fontenot

100 Woman's Way Baton Rouge, LA 70810

Ed Giniat

303 E. Wacker Drive Chicago, IL 60601

Todd Linden

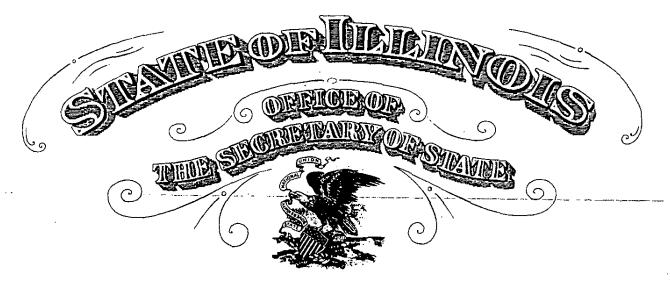
210 Fourth Avenue Grimmell, IA 50122

James A. Berg

8200 Walnut Hill Lane Dallas, TX 75231

Monica S. Doyle

111 S. 11th Street, Suite 210 Philadelphia, PA 19107



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

HEALTH FORUM, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 19, 1997, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD TAXED ING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of

JUNE

A.D.

2016

Authentication #, 1616801964 verifiable until 06/16/2017 Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE