# Flambla.7

(Re	questor's Name)	
(Ad	dr <b>ess</b> )	
. (Ad	dress)	
(Cit	y/State/Zip/Phone i	#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	9)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to Part a	Filing Officer: - Filed In eri	as on on
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Office Use Only

Record updated 1/10/2017



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#### **COVER LETTER**

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TO:

Registration Section
Division of Corporations

SUBJECT:		Henry Ford Heal	lth System		
bebleti,		Name of Corpo	ration – must ir	iclude suffix	
Dear Sir or M	adam:				
Affairs in Flo	rida", "Cei	on by Foreign Not for Patificate of Existence", or enced not for profit corporate	r "Certificate o	f Status" and che	ck are submitted to
Please return	all corresp	ondence concerning this	matter to the f	ollowing:	
	Douglas	Samojedny			
		Nan	ne of Person		
	Henry Ford Health System				<b>基图 请</b>
		Fin	m/Company		FILE JAN 20
735 John R Road, Suite 150					
	····		Address		
	Troy, Mi	1 48083			
		City/Sta	te and Zip Cod	e	<u> </u>
	rxadvem	o@hfhs.org			
	E-m	ail address: (to be used	for future annua	al report notificat	tion)
For further in	formation	concerning this matter, p	please call:		
Douglas Samojedny			800 at (	456-2112	
	Name o	f Person	Area Code	Daytime Tele	ephone Number
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a	check for	the following amount:			
\$70.00 Fil	ing Fee	☐\$78.75 Filing Fee & Certificate of Statu		Filing Fee & ied Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

import in languin the name at p	ration: must include the word "INCORPORATED" or "CORPORATION" or words or abbugge as will clearly indicate that it is a corporation instead of a natural person or partnership in tresent. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation of the purpose of transacting businesses in Florida, enter alternate corporate name adopted for the purpose of transacting businesses.	if not so contai in.)	ined
Michigan	3. 38-1357020	ness in consu	•,
(State or cou	ntry under the law of which it is incorporated) (FEI number, if applicable)		<del>-</del>
4. 9/8	Date of Incorporation)  5. perpetual (Date of duration, if other than p		·
	Date of Incorporation) (Date of duration, if other than p	perpetuat)	
6. (Date first cond	ubted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to deter-	mine penalty lia	ability.)
	ad Suite 150, Troy, MI 48083		
··	(Principal office address)		<del></del>
	Same		
<u> </u>	(Current mailing address, if different)	—i.,,,	
. To Mail media	ations to our patients residing in the state of Florida		S.
	corporation authorized in home state or country to be carried out in the state of Florida)	<u></u>	Tη
Name and str	ect address of Florida registered agent: (P.O. Box NOT acceptable)		720
7. Pulle ald <u>all</u>	addites of Florida registered agent. (F.O. Box 1001 acceptable)		
Name:	InCorp Services, Inc.		
Office Address:	17888 67th Ct N	- 1552± '	ယ္ 
: .	Loxabatchee Fiorida 33470	3-11	7
	(City) (Zip Code)		
Having been ha designated in th further agree to	agent's acceptance: med as registered agent and to accept service of process for the above stated cor is application, I hereby accept the appointment as registered agent and agree to comply with the provisions of all statutes relative to the proper and complete per familiar with and accept the obligations of my position as registered agent.	act in this ca	pacity. I
	Sera Brautigam on behalf (Registered agent's signification)	of Inco	orp Service. In
the Departm	a certificate of existence duly authenticated, not more than 90 days prior to deliver tent of State, by the Secretary of State or other official having custody of corporate under the law of which it is incorporated.	y of this appl	lication to

#### 12. Names and addresses of officers and/or directors

#### A. DIRECTORS

Chairman:	
Address:	·
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	를써 <b>하</b>
B. OFFICERS	JAN 2
President: CEO Nancy M. Schlichting One Ford Place 5B, Detroit MI 48202 Address:	
of Pharmacy ServicesDaniel P. Kus	第5 Q 第6 Q
Vice President:  30100 Telegraph Rd, Suite 200, Bingham Farms, MI 48205 Address:	
Edith L. Eisenmann	
One Ford Place 5B, Detroit, MI 48202	
Edward G. Chadwick Treasurer:	
One Ford Place 5B, Detroit, MI 48202 Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional off  13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of t	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of t  Daniel P. Kus VP of Pharmacy Services  (Typed or printed name and canacity of person signing application)	

### Henry Ford Health System Corporate Officers 12/24/2015

Sandra E. Pierce, Chair, Board of Trustees

Chair

C/O Governance

Henry Ford Health System

One Ford Place Detroit, MI 48202

Nancy M. Schlichting, Chief Executive Officer

CEO

e-mail-nschlie1@hfhs.org

Henry Ford Health System

One Ford Place 5B

Detroit, Michigan 48202

Jack Martin

Vice Chair

C/O Governance One Ford Place 5B

Detroit, Michigan 48202

Stephanie W. Bergeron

Vice Chair

C/O Governance One Ford Place 5B Detroit, Michigan/48202

J. Wes Paisley

C/O Governance One Ford Place 5B

Vice Chair

Detroit, Michigan 48202

Leroy C Richie Vice Chair

C/O Governance One Ford Place 5B Detroit, Michigan/48202

Edith L. Eisenmann, Secretary e-mail- ceisena@hfhs.org

Phone- 313 876-8401

Henry Ford Health System One Ford Place 5B Detroit, Michigan 48202

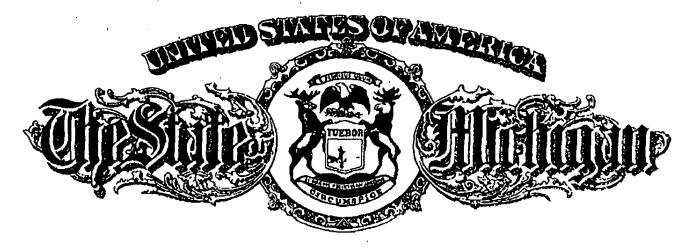
Edward G. Chadwick, Treasurer e-mail- echadwi1@hfhs.org Phone- 313 876-8714

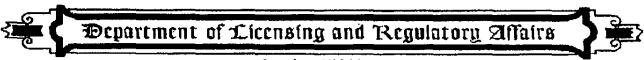
Henry Ford Health System One Ford Place 5B Detroit, MI 48202

Daniel P. Kus, V.P. of Pharmacy Services

e-mail-dkus1@hlhs.org Phone 734 751-8004

Henry Ford Health System 30100 Telegraph Rd, Suite 200 Bingham Farms, MI 48205





Lansing, Michigan

This is to Certify That

#### HENRY FORD HEALTH SYSTEM

was validly incorporated on September 8, 1915, as a Michigan nonprofit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1982 PA 162, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to conduct affairs in Michigan and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1361527

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 4th day of January, 2016.

Julia Dale, Acting Director

Corporations, Securities & Commercial Licensing Bureau