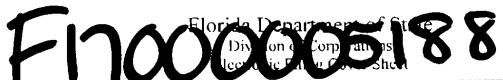
11/14/2017

Division of Communions



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.

(((H17000300264 3)))



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Division of Corporations

Fax Number : (858)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (512)418-6949 : (954)208-0845 Fax Number

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

Email	Address:		
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FOREIGN PROFIT/NONPROFIT CORPORATION

Geisinger Clinic Inc.

Requesting original filing date of 11-14-17, thank you!

فأخلا والمحالفة بالبار والتاقف فستأه وورجه بالبارا والمسروعي	
Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Requesting original filing date of 11-14-17, thank you!

· Electronic Fifing Menu — Corporate Filing Menu

COVER LETTER

TO:	: New Filing Section Division of Corporations				
SUBJ	FCT: Geisinger Cl				
,5016)	G(2) (Name of Corporation	ı – must include suffix		
Dear S	ir or Madam:				
Affairs	in Florida", "Cert	on by Foreign Not for Profit ifficate of Existence", or "Conced not for profit corporations."	ertificate of Status" and cho	ck are submitted to	
Please	return all correspo	indence concerning this mat	ter to the following:		
	Karen Ra				
		Name of	Person		
	Geisinger	Dept. of Legal Services			
		Firm/Co	impany		
	100 N. At	cademy Avc.			
	 ,	Add	ress		
	Danville,	PA 17822-4031			
	and a second second second	City/State an	d Zip Code	····	
		goisinger.edu			
	E-in:	ni address: (to be used for fo	uture annual report notifica	ition)	
For fu	rther information (concerning this matter, pleas	e call:		
Karer	Rauch	ot ć	570 271-6781 Area Code & Daytime Te		
	Name of	Person	Area Code & Daytime Te	lephone Number	
MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclo	sed is a check for t	he following amount:			
CI \$7	0.00 Filing Fee	□\$78.75 Filing Fee & Certificate of Status	☐\$78.75 Filling Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Scatus Certified Copy	

850-617-6381

11/15/2017 10:26:00 AM PAGE 1/001 Fax Server



November 15, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: GEISINGER CLINIC INC.

REF: W17000090996

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a statement containing the purpose(s) authorized by the jurisdiction of its incorporation, of which it intends to pursue in this state, pursuant to 617.1503(d), Florida Statutes.

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.

Karen A Saly Regulatory Specialist II FAX Aud. #: H17000300264 Letter Number: 217A00023106

2017 NOV 16 AM (\$ 0.7)

111 HEY 14 AM 10: 02

P.O BOX 6327 - Tallahassee, Florida 32314

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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:

Geisinger Clinic Inc							
The second for the second are	: must include the word "li will clearly indicate that it . "Company" or "Ce." may	is a compression	indestina a matti	n nerson of narmership	11 1101 50	ns of like contain	: ed ,
(If name unavailable	in Florida, enter alternate	corporate name	adopted for the pu	rpose of transacting bus	iness in	Florida)	v
Pennsylvania		3.					
(State or country u	nder the law of which it is	ncorporated)	(FE	I number, if applicable)		
4. 03/01/1962		5	Perpetual				
(Date o	f Incorporation)	~.	(Duration: Year	corp. will cease to exist	or "perm	etual")	· -
16/20/2017							
(Date first conducted)	affairs in Florida if prior to	registration, Sec.	sections 617,1301	& 617.1502, F.S. to deter	mine per	ially That	$\overline{d}dy_i) = -i\omega_i$
, 100 N. Academy Av	c., Danville, PA 17822-40	31					,
1	, c., Dairville, Fit 17022 To	(Principal o	ffice address)				
			Same March				•
SAA							_
8. remotely from their bomes (Purpose(s) of cospo	clinical research and operates pla in Florida. ration authorized in home ddress of Florida registe	state or country	to be carried out in	the state of Florida)	inicat (esca	een campe	yees working
Name:	C T Corporation S	ystem	.,		<u>:</u> .	2017 6	w*;-
							• :
Office Address:	1200 South Pine Isla	nd Road			2.00 2.00 2.00 2.00 2.00 2.00 2.00 2.00	ICV II	er.
Office Address:	1200 South Pine Isla	 , 		33324	발 편, ::**	THE ASH LIN	<u>क्रास्त्र</u> क्रम १३ १
Office Address:		 , 	Florida	33324 (Zip Code)		OLHY NI ASI	CONTROL OF THE CONTRO

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 addresses of officers and/or directors
A. DIRECTORS
Chairman: See Attached
Address:
Vice Chairman:
Address
Director:
Address;
Director:
Address:
B. OFFICERS
President:
Address:
Vice President:
Address:
Secretary:
Address:
Trensurer:
Address:
the state of the s
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Town E Looke (Typed or printed name and capacity of person signing application)
Compression for the control of the c

GEISINGER CLINIC 100 N. Academy Ave., Danville, PA 17822-4031

BOARD OF DIRECTORS

Robert J. Dictz, Chair
Earl Foura, Vice Chair
Chris Holcombe, PE
Virginia McGregor
David T. Feinberg, MD, MBA, GH President and CEO (Ex-Officio)
Jaewon Ryu, MD, JD, GH Chief Medical Officer (Ex-Officio)
Lynn Miller, GH Executive Vice President, Chief Administrative Officer, Clinical Operations (Ex-Officio)

OFFICERS

President	David T. Feinberg MD,		
MBA			
Executive Vice President Chief Financial Officer and Treasurer	Kevin F.		
Brennan			
Executive Vice President Chief Legal Officer and Secretary	David J. Felicio,		
Esquire			
Associate Chief Legal Officer and Assistant Secretary	Daniel E. Lohr, Esquire		

10:01 My 11 ASM 10:01

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

11/13/2017

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

GEISINGER CLINIC

is duly registered as a Pennsylvania Non-Profit (Non Stock) under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto set my hand end caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC171113100308-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify