

7/3/2018

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FOREIGN PROFIT NONPROFIT CORPORATION
Providence Medical Institute, Inc.

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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:

1. Providence Medical Institute, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
California 33-0283773
(State or country under the law of which it is incorporated) (FEL number, if applicable)
2/24/1987 Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first conducted affairs in Florida if prior to registration. See sections 617.1301 & 617.1302, F.S. to determine penalty liability.)
1801 Lind Avenue SW, Renton, Washington 98057
(Principal office address)
1801 Lind Avenue SW, Renton, Washington 98057
(Current mailing address)
8. health care
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)
Name: Business Filings Incorporated
Office Address: 1200 South Pine Island Road
Plantation 33324
(City) Florida (Zip Code)
10. 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.

Mark Williams, AVP, Business Filings Incorporated
(Registered agent's signature)
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.

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12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Richard Blair

Address: 1801 Lind Avenue SW, Renton, Washington 98057

Director: Dave Olsen

Address: 1801 Lind Avenue SW, Renton, Washington 98057

B. OFFICERS

President: Mike Butler

Address: 1801 Lind Avenue SW, Renton, Washington 98057

Vice President: Venkat Bhamidipati

Address: 1801 Lind Avenue SW, Renton, Washington 98057

Secretary: Cindy Strauss

Address: 1801 Lind Avenue SW, Renton, Washington 98057

Treasurer: Venkat Bhamidipati

Address: 1801 Lind Avenue SW, Renton, Washington 98057

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Cindy Strauss
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)14. Cindy Strauss, Secretary
(Typed or printed name and capacity of person signing application)

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**Attachment to the Application for Foreign Authorization
For
Providence Medical Institute, Inc.**

12A: Additional Directors:

- Dick P Allen, 1801 Lind Avenue SW, Renton, Washington 98057
- Isiaah Crawford, PhD, 1801 Lind Avenue SW, Renton, Washington 98057
- Lucille Dean, SP, 1801 Lind Avenue SW, Renton, Washington 98057
- Sr. Diane Hejna, CSJ, RN, 1801 Lind Avenue SW, Renton, Washington 98057
- Michael Holcomb, 1801 Lind Avenue SW, Renton, Washington 98057
- Sr. Phyllis Hughes, RSM, Dr.PH, 1801 Lind Avenue SW, Renton, Washington 98057
- Sallye Liner, MSN, RN, 1801 Lind Avenue SW, Renton, Washington 98057
- Mary Lyons, PhD, 1801 Lind Avenue SW, Renton, Washington 98057
- Walter Noce, Jr, 1801 Lind Avenue SW, Renton, Washington 98057
- Carolina Rcyes, MD, 1801 Lind Avenue SW, Renton, Washington 98057
- Phoebe Yang, 1801 Lind Avenue SW, Renton, Washington 98057

12B: Additional Officers:

Jo Ann Escasa-Haigh, Vice-President, 1801 Lind Avenue SW, Renton, Washington 98057
Tammy Teodosio, Asst. Secretary, 1801 Lind Avenue SW, Renton, Washington 98057
John Whipple, Asst. Secretary, 1801 Lind Avenue SW, Renton, Washington 98057
Jim Watson, Asst. Secretary, 1801 Lind Avenue SW, Renton, Washington 98057
Jo Ann Escasa-Haigh, Asst. Treasurer, 1801 Lind Avenue SW, Renton, Washington 98057

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State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

PROVIDENCE MEDICAL INSTITUTE

FILE NUMBER: C1400153
FORMATION DATE: 02/24/1987
TYPE: DOMESTIC NONPROFIT CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of June 27, 2018.

ALEX PADILLA
Secretary of State