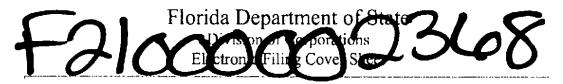
4/8/2021

Division of Corporations



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(((H210001403323)))



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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Banner Health, A Nonprofit Corporation

Committee of the commit	·	
Certificate of Status		0
Certified Copy		1
Page Count		04
Estimated Charge		\$78.75



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2021-04-29 08:56:53 CST 4/16/2021 3:20:00 PM PAGE 1/001 Fax Server

19542080845

From: Ranae McGraw

April 16, 2021

FLORIDA DEPARTMENT OF STATE Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: BANNER HEALTH

REF: W21000051770

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.

Missing corporate suffix on fax audit sheet and title for Ronald J. Creasman.

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.

Sharon D Franklin Regulatory Specialist II

FAX Aud. #: H21000140332 Letter Number: 621A00007906

PLEASE HONOR ORIGINAL DATE 04-08-2021

DocuSign Envelope ID: 40483C03-FC92-4BCA-8291-8C38CDFE34B1

APPLICATION BY EOREIGN NOT FOR PROFIT CORPORATION EOR 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:

	present, "Company" or "Co." may not	DRPORATED" or "CORPORATION" or words or ablacements of a natural person or partnership to used as a corporate suffix by a nonprofit corporate	ion.)
(If name unav	railable in Florida, enter alternate corp	porate name adopted for the purpose of transacting but	siness in Florida)
Arizona		3.	
		3. (FEI number, if applicable	
. 1/17/1938		5. (Date of duration, if other than	
(Date of Incorporation)	(Date of duration, if other than	perpetual)
Date first con-	ducted affairs in Florida if prior to regis	tration, Sec sections 617.1501 & 617.1502, F.S. to deter	mine penalty liabilit
- 7901 N. Cent	ral Ave., Suito 160, Phoenix, AZ 850	10	
ZZOTIN. C.CIII		incipal office street address)	
		· —	
	(Curre	ent mailing address, if different)	
Healthcare			
(Purpose(s) of	corporation authorized in home state	or country to be earried out in the state of Florida)	02
	vant addrage of Florida registered a	igent; (P.O. Box NOT acceptable)	021 APR
Manne and cr	reet address of Frontia registered a	igent, (1.10. not iggs) acceptable)	ž
Name and st			1
	C.T.C.		: œ
Name:			
Name:	- 1200 South Pine Island Road		
Name:	- 1200 South Pine Island Road		
Name:	- 1200 South Pine Island Road		8 AH

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.

To; 18506176383

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2021-04-29 08:56:53 CST

19542080845

From; Ranae McGraw

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12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOI	RS		
□Chairman	Name: Michael Garmeiter	□Chairman	Name: Quentin P. Smith, Jr.
□Vice Chairman	Address: 2901 N. Central Ave., Suite 160	⊠Vice Chairman	Address: 2901 N. Central Ave., Suite 160
□ Director	Phoenix, AZ 85012	□Director	Phoenix, AZ 85012
□President		□President	
□Vice President		□Vice President	
□Secretary	□Treasurer	□ Secretary	□Treasurer
Other:	□ Other:	□ Other:	Other:
□Chairman	Name David M. Bixby	□Chairman	Name: Peter S. Fine
□Vice Chairman	Address, 2901 N. Central Ave., Suite 160	□Vice Chairman	Address: 2901 N. Central Ave., Suite 160
□Director	Phoenix, AZ 85012	□Director	Phoenix, AZ 85012
□President		□President	
□Vice President		□Vice President	***************************************
⊠Secretary	☐Treasure:	□Secretary	□Treasurer
□Other:	Other:	□ Other'	Other
□Chairman	Name: Brenda Schaefer	□Chairman	Name: Ronald J. Creasman, M.D
□Vice Chairman	Address 2901 N. Central Ave., Suite 160	□Vice Chairman	Address: 2901 N. Central Ave., State 160
Director	Phoenix, AZ 85012	Director	Phoenix, AZ 85012
□President		□President	****
□Vice President		⊠Vice President	
□Secretary	⊠Treasurer	□Secretary	□ Treasurer
□Other	Other:	☐ Other:	Other
NOTE, Importan Non-in 13 David M. Bis	e of Chairman, Vice Chairman, or any o	ir Florida Department i Micei listed in numbei	of State Annual Report form. 12 of the application)

To: 18506176383 Page: 6 of 6 2021-04-29 08:56:53 CST 19542080845 From Ranae McGraw

21040112315866



STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

BANNER HEALTH

ACC file number: 00119750

was incorporated under the laws of the State of Arizona on 01/17/1938;

That all annual reports owed to date by said corporation have been filed or delivered for filing, and all annual filing fees owed to date have been paid; and

That, according to the records of the Arizona Corporation Commission, said corporation is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, affixed the official seal of the Arizonal Corporation Commission, and aspeed this Certificate on this date: 04/01/2021

Matthew Neubert, Executive Director



