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(Requestor's Name)				
(Address)				
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SEP 23 2021

M. SOLOMON

COVER LETTER

TO:	Registration Sec Division of Corp				
SURI	ECT:	Venta	n Hex	alth law	
170170		Name of corp	oration - mu	st include suffix	
Dear S	ir or Madam:				
"Certif	ficate of Existence	on by Foreign Corporat ," or "Certificate of Go corporation to transact	od Standing"	and check are sub	ct Business in Florida," omitted to register the
Please	return all correspo	ondence concerning this	s matter to the	e following:	
		Etica N	Sald ame of Perso	n	
		<u>Lorte</u>	es Heat	th. Inc.	·-·
					_
		<u> </u>	Address	received	, Ste. 320
			•	Mrs	
		Dall City	as_i / x	15244	· · · · · · · · · · · · · · · · · · ·
		Ernail address: (to b	rha) a	beo.com	notification)
		12-mail address. (to b	e used for fat	are annual report	ionneation)
For fur	ther information of	concerning this matter,	please call:		
~	5			2 11 0 2 0	4
<u>tri</u>	ca Jorith	at (<u> ੫ </u>	:02 Code	Daytime Telep	hone Number
	Name of Person	, Al	ea Code	Daytine Telep	none Number
	STREET/COU	RIER ADDRESS:		MAILING A	DDRESS:
	Registration Sec			Registration S	
	Division of Corp			Division of C	
	The Centre of Ta			P.O. Box 632	
	Tallahassee, FL	Street, Suite 810 32303		Tallahassee, F	-L 32314
		he following amount:			
		to: FLORIDA DEPAR			— ••••••••••••••••••••••••••••••••••••
□ \$70	.00 Filing Fee	S78.75 Filing Fee Certificate of State		75 Filing Fee & tified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy
					Certified Copy RECEIVE SEP 23 2021

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) State or country under the law of which it is incorporated)

Signature (FEI number, if applicable) 4. 3/3/2014 5. Cate of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability) 5001 LBJ Freeway, Ste. 320 Wallas, Tk (Principal office street address) 5001 UST Freeway Str 320 Dallos Tx (Current mailing address, it different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Comparation Soular Company Name: Tallahassee, Florida 32301
(City) (Zip code) Office Address: 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. Solyman Washington Assistant Secretary
(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS SEE AHACKED No	ext Itige —
OChairman Name: Naucd Alpean	OChairman Name: MARCN Habriga
DVice Chairman Address: 5001 UST EARLY	DVice Chairman Address: 5001 LBJ Fund
MiDirector Ste. 320	Mildirector Ste. 320
Dallas, TY 75244	President Dallag TX 75244
[IVice President	□Vice President
☐ Secretary ☐ Treasurer	☐ Secretary ☐ Treasurer
□Other	Other Other
DVice Chairman Address: SOCI LBJ FLAN	□Chairman Name: NCb SixHCN □Vice Chairman Address: 5001 LBJ Fuy
Director Ste. 320	©Director \$10.320
Presidentice Vallas TX 175244	President Dallas, TX 7524
ElVice President	=
ElSecretary ElTreasurer	Vice President SS
□Other □ □Other □	ye.
Chairman Name: Lane Cortes	OChairman Name: (Kig hadulalich
DVice Chairman Address: 5001 (BJ Flow)	DVice Chairman Address: SCG1 LBJ Fu-
□Director <u>S14.330</u>	Director Ste 320
President Dallas TX MS244	President Dalks TX 15244
□ Vice President	
	□Vice President
X Secretary ☐ Treasurer	□Vice President □Secretary □Treasurer
Secretary	Secretary Treasurer
, and the second	Secretary Treasurer Nother <u>Arsident - FR + Dother</u> Hospital Vecticine Chiment will be imaged for reporting purposes only. Non-indexed
☐Other ☐	Secretary Treasurer Nother <u>Arsidest - F.R. t.</u> Other Hespita Medicise Chament will be imaged for reporting purposes only. Non-indexed not of State Annual Report form.
Important Notice: Use an attachment to report more than six (6). The attachment individuals may be added to the index when filing your Florida Department	Secretary Distribution Contact Annual Report form. Distribution Dist

Ventra Health, Inc. Officer and Director Supplement

Officers

Michael O'Boyle	CEO	5001 LBJ Fwy, Ste 320, Dallas TX, 75244
Rob Sutton	CFO & Treasurer	5001 LBJ Fwy, Ste 320, Dallas TX, 75244
Lane Cates	SVP, General Counsel, & Secretary	5001 LBJ Fwy, Ste 320, Dallas TX, 75244
Craig Radulovich	President – ER & Hospital Medicine	5001 LBJ Fwy, Ste 320, Dallas TX, 75244
Craig Watt	EVP - Anesthesia	5001 LBJ Fwy, Ste 320, Dallas TX, 75244

<u>Directors</u>

David Alpern	5001 LBJ Fwy, Ste 320, Dallas, TX, 75244
Aaron Habriga	5001 LBJ Fwy, Ste 320, Dallas, TX, 75244



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VENTRA HEALTH, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF AUGUST, A.D.

2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Authentication: 204013120

Date: 08-26-21



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2021

MICHAEL O'BOYLE VENTRA HEALTH, INC. 5001 LBJ FWY, STE 320 DALLAS, TX 75244

SUBJECT: VENTRA HEALTH, INC. Ref. Number: W21000124945

We have received your document for VENTRA HEALTH, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Must list the first 6 officers/directors on the first page and then attach a page if necessary for additional officers/directors. Also, no coverpage was included with the filing for contact information and no indication if a certificate of status or certified copy is being ordered.

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

Mel Solomon Senior Section Administrator

2e/2321

Letter Number: 021A00022305