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COASTAL  
HEALTHCARE  
GROUP, INC.  
Its Subsidiaries and Affiliates  
Healthcare Management™

2828 Croasdaile Drive  
Post Office Box 15300  
Durham, NC 27705  
1-800-476-4587  
AX 913-3660

December 20, 1994

Florida Secretary of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

RECEIVED  
DECEMBER 21 1994  
\*\*\*122.50\*\*\*

To Whom It May Concern:

Please find enclosed documentation regarding the filing of authorization to transact business in Florida for Coastal Managed Healthcare, Inc.:

1. Application by Foreign Corporation for Authorization to Transact Business in Florida and one exact copy of application
2. Certificate of Existence
3. Certificate of Designation Registered Agent/Registered Office
4. Filing fees and certified copy fees in the amount of \$ 122.50.

Upon filing completion, please return the certified copy and the letter of acknowledgment to:

Coastal Healthcare Group  
Legal Services Attn: Marcia Russell  
2828 Croasdaile Drive  
Durham, NC 27705

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Should you have any questions, please feel free to contact me at 1-800-476-4587 extension 4382. If I am unavailable, please contact Marcia Russell at the same extension. Thank you for your prompt assistance in this matter.

Sincerely yours,

*Sherri P. Robie*

Sherri P. Robie  
Paralegal

Enclosures

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:

1. Conatal Managed Healthcare, Inc.  
(Name of corporation: the word "INCORPORATED," "COMPANY," 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.)
2. North Carolina  
(State or country under the law of which it is incorporated)
3. June 23, 1993 4. Perpetual  
(Date of Incorporation) (Duration)
5. 56-1827941  
(Federal Employer Identification number, if applicable)
6. Upon Qualification  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)
7. 2828 Croasdalle Drive Durham, NC 27705  
(Current mailing address)
8. Management services for managed healthcare companies  
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and addresses of officers and or directors:

A. Directors:

Chairman: Randy J. Stewart

Address: 2828 Croasdalle Drive  
Durham, NC 27705

XXXXXXXXXXXX Shawn W. Hardister

Address: 2828 Croasdalle Drive  
Durham, NC 27705

Director: Walter E. Birch

Address: 2828 Croasdalle Drive  
Durham, NC 27705

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**D. Officers:**

President Randy J. Stewart

Address 2828 Crounsville Drive  
Durham, NC 27705

Vice President: Walter E. Birch

Address: 2828 Crounsville Drive  
Durham, NC 27705

Secretary: Shawn W. Hardister; Assistant Secretary Angela M. Snedeker

Address: 2828 Crounsville Drive  
Durham, NC 27705

Treasurer: Walter E. Birch

Address: 2828 Crounsville Drive  
Durham, NC 27705

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: CT Corporation System

Office Address: 1200 South Pine Island Road  
Plantation

Florida 33324  
Zip Code

**11. 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.

Registered agent's signature: AD Hamilton

AD Hamilton, Spec. Asst Secy.

12. 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.

13. Randy J. Stewart

(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Randy J. Stewart, President

(Name and capacity of person signing application)

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Constal Managed Healthcare, Inc.

2. The name and address of the registered agent and office is:

CT Corporation System

(NAME)

1200 South Pine Island Road

(P.O. BOX NOT ACCEPTABLE)

Plantation, Florida 33324

(CITY/STATE/ZIP)

SIGNATURE

Randy J. Slavast  
(corporate officer)

TITLE President

DATE December 19, 1994

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

AD Hamilton  
AD Hamilton, Spec. Asst. Secy.

DATE 12/22/94

REGISTERED AGENT FILING FEE \$35.00

# STATE OF NORTH CAROLINA



Department of The  
Secretary of State

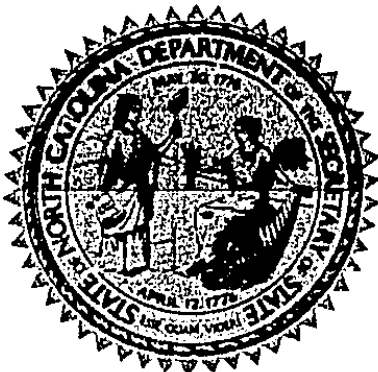
## CERTIFICATE OF EXISTENCE

I, RUFUS L. EDMISTEN, *Secretary of State of the State of North Carolina*, do hereby certify that

COASTAL MANAGED HEALTHCARE, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 23rd day of June, 1993, with its period of duration being perpetual.

I FURTHER certify that the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 15th day of December, 1994.

*Rufus L. Edmisten*

Secretary of State

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