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C T CORPORATION SYSTEM	м	
Requestor's Name	'	
1311 Executive Center	Drive, Ste. 200	
Address		500000 1407009 -02/1579501051024 ++++70.00 ++++*70.00
Tallahassee, Fl. 323	01 (904) 656-8298	*****70.00 *****70.00
City State Zip	Phone	
CORPORA	ATION(S) NAME	
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CR2E031 (1-89)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN PLORIDA

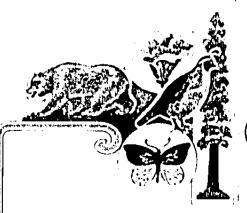
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUB-MITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(St	ite or country under the law of which it is incorporated)		 -
3. February I	. 1992 4. Perpetual	ν <u>η</u> 71	: •
· (Date of In	corporation) (Duration)	ij	
	01, 43, 60, 61		
Б. <u>———</u>	95-4358085 (Federal Employer Identification number, if applicable)		_
	(*	77	
6. February	1, 1995		,
(Date first trans	acted business in Florids. See sections 607.1501, 607.1502, a	ind 817.	166, F
	ders Road, Northbrook, Illinois 60062		
7. <u>2215</u> San	dera houd, horehbrook, fifthora 00002		
7. <u>2215 San</u>	(Current mailing address)		
	(Current mailing address)		
8. Business (Brief description		tate of F	lorlda
8. Business (Brief description 9. Names and of the contract of	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the statement addresses of officers and or directors: Ors:	tate of F	lorlda
8. Business (Brief description 9. Names and of the contract of	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the statement addresses of officers and or directors:		lorlda
Business (Brief description 9. Names and of A. Direct Director Chairman:	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the states addresses of officers and or directors: OFS:		
Business (Brief description 9. Names and of A. Direct Director Chairman:	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the statement addresses of officers and or directors: Ors: Thomas R. Hayer, M.D.		
Business (Brief description B. Names and of Birector Chairman: Address:	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the activated addresses of officers and or directors: OFS: Thomas R. Mayer, M.D. Three Point Drive, Suite 103 Brea, California 92621		
Business (Brief description 9. Names and of A. Direct Director Chairman:	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the active addresses of officers and or directors: Ors: Thomas R. Mayer, M.D. Three Point Drive, Suite 102		
Business (Brief description 9. Names and of A. Direct Director Chairman: Address: Director	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the activated addresses of officers and or directors: OFS: Thomas R. Mayer, M.D. Three Point Drive, Suite 103 Brea, California 92621		
Business (Brief description 9. Names and of A. Direct Director Chairman: Address: Director	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the active addresses of officers and or directors: Ors: Thomas R. Hayer, M.D. Three Point Drive, Suite 103 Brea, California 92621 Diane L. Munson		
Business (Brief description B. Names and of A. Direct Director Chairman: Director Classification Address: Address:	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the activated addresses of officers and or directors: Ors: Thomas R. Mayer, M.D. Three Point Drive, Suite 103 Brea, California 92621 Diane L. Munson 2211 Sanders Road Northbrook, Illinois 60062		
Business (Brief description) B. Names and (B. Director Chairman: Address: Director Chairman:	(Current mailing address) management consultants to physicians in of the nature of the business in which it is engaged in the active addresses of officers and or directors: Ors: Thomas R. Maver, M.D. Three Point Drive, Suite 103 Brea, California 92621 Diane L. Munson 2211 Sanders Road Northbrook, Illinois 60062 Darrell J. Stremler		

(FLA.-2189 - 2/1/92)

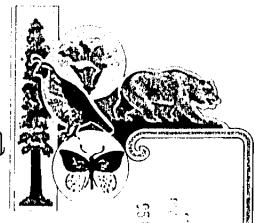
President:	Thorsas R. Mayer, M.D.		
Address:	Three Pointe Drive, Suite	103	<u> </u>
 	Brea, California 92621		
Vice President:	Diane t. Munson		
Address:	2211 Sanders Road		
		062	
Secretary: Prosident			
	Thomas R. Schuman 2215 Sanders Road		177
Address:		062	
_	0		
Treasurer:	Dennis R. Owczarski 2215 Sanders Road		<u> </u>
Address:		062	<u>-</u>
Office	Address: c/o C T Corporation Sys		
11. Registere	Plantation d agent's acceptance:	Florida,	33324 Zip Code
11. Registere Having I stated corporat es registered eg provisions of al am familiar with	Plantation Id agent's acceptance: Deen named as registered agent and to lion at the place designated in this appoint and agree to act in this capacity. I statutes relative to the proper and contain and accept the obligations of my posted agent's signature: Den L. T.	Florida o accept service of discation, I hereby I further agree to emplete performation as registers T corporation as (Officer)	Zip Code of process for the accept the appoints comply with the nee of my duties, a dagent.
Having istated corporates registered as registered as provisions of all am familiar with Registere 12. Attached delivery of this chaving custody	Plantation Id agent's acceptance: Deen named as registered agent and to lion at the place designated in this appoint and agree to act in this capacity. I statutes relative to the proper and contain and accept the obligations of my posted agent's signature: Den L. T.	Florida o accept service of dication, I hereby I further agree to emplete performs sition as registere in the following services of the following s	Zip Code of process for the a accept the appoint comply with the nce of my duties, a dagent. Eystem T. Vice President of Officer) re than 90 days price of State or other
Having Istated Corporates registered as provisions of all am familiar with Registere 12. Attached selivery of this chaving custody	Plantation If agent's acceptance; Deen named as registered agent and to long at the place designated in this appoint and agree to act in this capacity. I statutes relative to the proper and contained accept the obligations of my posterior and accept the obligations of my posterior agent's signature: Contain Contain Contain Contain	(Officer) John Market And Title on ticated, not more than a more	Zip Code of process for the accept the appoints comply with the nce of my duties, ad agent. Every first than 90 days price of State or other f which it is incorporate to the code of th

(FLA.-2189)



State of California

SECRETARY OF STATE



CERTIFICATE OF STATUS DOMESTIC CORPORATION

1. BILL JONES, Secretary of State of the State of California, hereby certify:

That on the

Hth

day of

February

19 32

STRATEGIC HEALTHCARE MANAGEMENT, INC.

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.

CONTROL OF THE PROPERTY OF THE



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this 10th day of February, 1995

BILL JONES

Secretary of State

94 25216

1201 HAYS STREET TALLAHASSEE, FL 32301-2607 904-222-9171

800-342-8086

F95000000762

PRESTRUCTUALL.

ACCOUNT MS.

072100000032

REFERENCE

135158

4390339

AUTHORIZATION

COST LIMIT

faturga Pyint

ORDER DATE: October 28, 1996

ORDER TIME : 12:37 PM

ORDER NO. : 135158-050

CUSTOMER NO: 4390339

CUSTOMER: Ms. Tina Ezell

Medpartners, Inc. 3000 Riverchase

Galleria Tower / Ste. 1000

Birmingham, AL 35244

CHANGE OF AGENT

NAME:

STRATEGIC HEALTHCARE

MANAGEMENT INC. .

SECRETARY OF STATE
TAIL LAHASSEE, FLORIG

500002013025--3

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Danny G. Smith

RECEIVED
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PUSION OF CORFORATION

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Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of CALIFORNIA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: STRATEGIC HEA	ALTHCARE MANAGEMENT, INC.		
1b. The mailing address of the corporation is:			
3000 Galleria Tower, Suite 1000, Birr	ningham, AL 35244		
1c. Date of incorporation: 2-15-1995	Occument number: <u>F95000000762 </u>		
2. The name and address of the current registered	agent and office:		
CT CORPORATION SYSTEM			
1200 SOUTH PINE ISLAND ROAD			
PLANTATION, FL. 3324	PII 4: 20 SEE. FLORI		
3. The name and address of the new registered age THE PRENTICE-HALL CORPORATION S	· · ·		
1201 Hays Street, Suite 105			
The street address of its registered office and the s registered agent, as changed, will be identical. Such change was authorized by resolution duly adorso authorized by the board.			
	NOVEMBER /9, 1996		
(Signature of an officer, chairman or vice chairman of the board)	(Date)		
TRACY THRASHER, SEC.	, ,		
(Printed or typed name and title) Having been named as registered agent and to accept or corporation, I hereby accept the appointment as registariate, I further agree to comply with the provision complete performance of my duties, and I am familiate position as registered agent.	istered agent and agree to act in this ns of all statutes relative to the proper and		
THE PRENTICE-HALL CORPORATION SYSTEM, INC. By: Lllorah W. Skipper	NOVEMBER 22 ,1996		
(Signature of Registered Agent) ** If signing on behalf on an entity:	(Date)		
•			
(Typed or Printed Name)	Assistant Secretary		
(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	(Capacity) FILING FEE: \$35.00		