

F950000000897

Document Number Only

C T CORPORATION SYSTEM

Requestor's Name

1311 Executive Center Drive, Ste. 200

Address

Tallahassee, FL 32301 (904) 656-8290

City State Zip Phone

150100011413116
02-23-95 110000-016
****122.50 ****122.50

CORPORATION(S) NAME

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of N.A.

☐ Fictitious Name

☒ Certified Copy

☐ Photo Copies

☐ CUS / G/S

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☐ Walk In

☒ Will Wait

☒ Pick Up

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Name
Availability

Document
Examiner

Updater

Verifier

Acknowledgment

W P. Veriller

2/23/95

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**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. Provider Business Services, 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. Georgia

(State or country under the law of which it is incorporated)

3. January 6, 1992

(Date of Incorporation)

4. Perpetual

(Duration)

5. 58-1972278

(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. To provide billing services to healthcare providers.

(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:

XXXXXXXX Edward L. Suggs, Jr.

Address: 709 Westchester Drive, High Point, NC 27261

XXXXXXXXXXXX Stephen V. Hill

Address: Same

RECEIVED
DIVISION OF
CORPORATION
JAN 10 1992

Florida

115

D. Officers.

President **Stephen V. Hill**
Address **709 Wentchester Drive, High Point, NC 27261**

Vice President **Edward L. Suggs, Jr.; Susan B. Steele; James Weeks**
Address **Same**

Secretary **Susan B. Steele**
Address **Same**

Asst. Sec. **Angela Snodaker** **2828 Crossdalla Drive, Durham, NC 27705**

Treasurer **Susan B. Steele**
Address **Same**

(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

Kevin J. Gallagher
Kevin J. Gallagher, Asst. Vice President

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 **Edward L. Suggs, Jr. / Vice President**

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 **Provider Business Services, 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

(corporate officer)

TITLE

Vice-President

DATE

February 20, 1995

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

DATE

2-21-95

Secretary of State
Corporations Division
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 950330823
CONTROL NUMBER : 9200029
DATE INC/AUTH/FILED: 01/06/1992
JURISDICTION : GEORGIA
PRINT DATE : 02/02/1995
FORM NUMBER : 211

COASTAL HEALTHCARE GROUP, INC.
LEGAL SERVICES ATTN MARCIA RUSSELL
2828 CROASDAILE DRIVE
DURHAM NC 27705

SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 23 2:10:35

CERTIFICATE OF EXISTENCE

I, MAX CLELAND, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PROVIDER BUSINESS SERVICES, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above and was incorporated, formed, or authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution or certificate of cancellation with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Max Cleland

MAX CLELAND
SECRETARY OF STATE