Corporation Information
Services, Inc.
1201 Hays Street
Tallahassee, FL [illegible]
904 222 9171
904 222 0191 Fax

F95000000932

95 FEB 21 AM 11:5[illegible]

[illegible] OF CORPORATIONS

CSC networks

Mail To
P.O. Box 5020
Tallahassee, FL 3231[illegible]

ACCOUNT NO. : 0721000000[illegible]2

REFERENCE : 547516 3990A

AUTHORIZATION : Patricia Pigott

COST LIMIT : $ 1.2.50

ORDER DATE : February [illegible], 1995

ORDER TIME : 10:5[illegible] AM

ORDER NO. : 547516

CUSTOMER NO: 3990A

900001414859

CUSTOMER: Cristina Celada, Esq
Reboul Macmurray Hewitt
45 Rockefeller Plaza

New York, NY 10111

FOREIGN FILINGS

95 FEB 21 PM 12:53

SEC[illegible]

NAME: PARAGON REHABILITATION, INC.

XX PROFIT
NON-PROFIT

XX CORPORATE
LIMITED PARTNERSHIP

XXX_ QUALIFICATION

[illegible]

[illegible] CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: [illegible]

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. Paragon Rehabilitation, Inc.
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "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. Delaware
(State or country under the law of which it is incorporated)

3. ____________________
(FEI number, if applicable)

4. January 18, 1994
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")

6. Upon filing
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)

7. c/o Transitional Health Services, 1300 Hurstborne Place,
9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222
(Current mailing address)

8. The corporation may engage in any or all lawful activity or business permitted under the laws of the U.S., the State of Florida or any other state, country, territory or nation.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. **Name and street address of Florida registered agent:**

Name: CORPORATION SERVICE COMPANY

Office Address: 1201 Hayes Street

Tallahassee, Florida, 32301
(Zip Code)

10. **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.

Corporation Service Company

[signature]
(Registered agent's signature)
Gail Shelby, as Agent

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.

12. Names and addresses of officers and/or directors: SEE ADDENDUM FOR ADDITIONAL DIRECTORS AND OFFICERS

A. DIRECTORS

Chairman: Randall J. Bufford

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

~~Vice Chairman~~ Director: Robert R. Bates

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Director: Robert R. Hawkins

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Director: John G. Hundley

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

B. OFFICERS

President: Lawrence W. Lepley, Jr.

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Vice President: Robert R. Bates

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Secretary: John G. Hundley (Assistant V.P. & Sec'y)

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Treasurer: James J. TerBeest (Treasurer & Ass't Sec'y)

Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Lawrence W. Lepley, Jr. President
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

X 14. [signature]
(Typed or printed name and capacity of person signing application)

ADDENDUM TO APPLICATION BY PARAGON REHABILITATION, INC.
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. ADDITIONAL DIRECTORS

Director: Lawrence W. Lepley, Jr.
Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Director: James J. TerBeest
Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

2. ADDITIONAL OFFICERS

Chairman of the Board: Randall J. Bufford
Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

Vice President & Ass't Sec'y: Robert R. Hawkins
Address: 1300 Hurstborne Place, 9300 Shelbyville Road, Suite 1300, Louisville, Kentucky 40222

180015.1

State of Delaware

Office of the Secretary of State

Edward J. Freel, Secretary of State

AUTHENTICATION

DATE

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 OCT -3 PM 1:29
... STATE
TALLAHASSEE, FLORIDA

100001967971
-10/08/96--01119--011
****236.25 ****236.25

DOCUMENT # F95000000932

1. Corporation Name

PARAGON REHABILITATION, INC.

Principal Place of Business	Mailing Address
% TRANSITIONAL HEALTH SERVICES 9300 SHELBYVILLE RD., SUITE 1300 LOUISVILLE KY 40222	% TRANSITIONAL HEALTH SERVICES 9300 SHELBYVILLE RD., SUITE 1300 LOUISVILLE KY 40222

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
400 Perimeter Center Terrace	400 Perimeter Center Terrace
Suite, Apt #, etc: Suite 650	Suite, Apt #, etc: Suite 650
City & State: Atlanta, GA	City & State: Atlanta, GA
Zip: 30346 Country: Dekalb	Zip: 30346 Country: Dekalb

4. Date Incorporated or Qualified To Do Business in Florida: 02/24/1995

5. FEI Number: 62-1396066 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **$8.75 Additional Fee required for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
~~PD~~ D/CEO/Chairman	~~LEPLEY, LAWRENCE W JR~~ J. Stephen Eaton	~~9300 SHELBYVILLE RD.~~ 400 Perimeter Center Terrace, Suite 650	~~LOUISVILLE KY 40222~~ Atlanta, GA 30346
~~VD~~ P	~~BATES, ROBERT R~~ Lawrence W. Lepley, Jr.	~~9300 SHELBYVILLE RD.~~ 400 Perimeter Center Terrace Suite 650	~~LOUISVILLE KY 40222~~ Atlanta GA 30346
~~AVSD~~ EVP/T	~~HUNDLEY, JOHN G~~ Alan C. Dahl	~~9300 SHELBYVILLE RD.~~ 400 Perimeter Center Terrace Suite 650	~~LOUISVILLE KY 40222~~ Atlanta GA 30346
~~TASD~~	~~TERBEEST, JAMES J~~ See attachment	~~9300 SHELBYVILLE RD.~~	~~LOUISVILLE KY 40222~~
~~VASD~~	~~HAWKINS, ROBERT R~~	~~9300 SHELBYVILLE RD.~~	~~LOUISVILLE KY 40222~~
~~-C-~~	~~BUFFORD, RANDALL J~~	~~9300 SHELBYVILLE RD.~~	~~LOUISVILLE KY 40222~~

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYES ST.
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name
Street
Suite, Apt #, Etc.
City — State FL — Zip Code

REINSTATEMENT 96 10/03/96

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Patricia Pizzuto
REGISTERED AGENT MUST SIGN

100001967971
Date 10/08/96--01119--012
****138.75 ****138.75

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Tracey C. Coley — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 9/25/96 — Daytime Phone #: (770) 698-9040

CR2E040 AF

PARAGON REHABILITATION, INC.
3100 WEST END AVENUE, SUITE 740
NASHVILLE, TN 37207
EIN NO. 62-1396066

(2)

DIRECTOR:

Sole Director
J. Stephen Eaton
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

OFFICERS:

CEO and Chairman of Board
J. Stephen Eaton
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

President
Lawrence W. Lepley, Jr.
3100 West End Avenue, Suite 740
Nashville, TN 37207

Executive Vice President and Treasurer
Alan C. Dahl
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

Executive Vice President
Randall J. Bufford
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

Executive Vice President and CFO
John Morris
3100 West End Avenue, Suite 740
Nashville, TN 37207

Executive Vice President and COO
Alan Sauber
3100 West End Avenue, Suite 740
Nashville, TN 37207

Chief Information Officer
Daniel F. Montgomery
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

Secretary
Paul A. Quiros
1201 Peachtree Street, Suite 2200
Atlanta, GA 30361

Assistant Secretary
Lisa A. Bennett
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

Assistant Secretary
Tracey C. Cosby
400 Perimeter Center Terrace, Suite 650
Atlanta, GA 30346

FILED
96 OCT 9 PM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/96

Document Number Only

F95000000932

C T CORPORATION SYSTEM

Requestor's Name
660 East Jefferson Street

Address
Tallahassee, Florida 32301

City State Zip Phone

-12/26/96--01012--022
*****35.00 *****35.00

CORPORATION(S) NAME

Paragon Rehabilitation, Inc

FILED
96 DEC 26 PM 3:12
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SH 12/26

( ) Profit
( ) NonProfit
( ) Limited Liability Company
( ) Amendment
( ) Merger
( ) Foreign
( ) Dissolution/Withdrawal
( ) Mark
( ) Limited Partnership
( ) Reinstatement
( ) Limited Liability Partnership
( ) Annual Report
( ) Reservation
( ) Other
(X) Change of R.A.
( ) Fictitious Name
( ) Certified Copy
( ) Photo Copies
( ) CUS
( ) Call When Ready
(X) Walk In
( ) Mail Out
( ) Call if Problem
( ) Will Wait
( ) After 4:30
(X) Pick Up

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

12/26/96

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

CR2E031 (1-89)

Florida Department of State, Jim Smith, 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 Delaware 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: Paragon Rehabilitation, Inc.

1b. Date of incorporation 2-17-95 Document number

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96 DEC 26 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Capital Service Company

1201 Hayes Street, Tallahassee, FL 32301

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

C T CORPORATION SYSTEM

c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Florida 33324

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Tracey C. Cosby
SIGNATURE

Tracey C. Cosby - Assistant Secretary
Typed or printed name and title

December 17, 1996
DATE

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

C T CORPORATION SYSTEM

SIGNATURE BY: Mary R Adams
Mary R. Adams (Registered Agent) Asst. Secy.

DATE 12-19-96

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)
(FLA. - 2194 - 3/4/92)

FILING FEE: $35.00