

F95000001353

Document Number Only

C T CORPORATION SYSTEM
 Requestor's Name
 1311 Executive Center Drive, Ste. 200
 Address
 Tallahassee, Fla. 32301 (904) 636-0290
 City State Zip Phone

CORPORATION(S) NAME

1075 6241
 C.T. Management Services, Inc.
 Ltd.
 C.T. Management Services, Inc. 11/7/71

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|--|---|--|
| <input checked="" type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input checked="" type="checkbox"/> Foreign | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Reservation | <input type="checkbox"/> Change of N.A. |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> Fictitious Name |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> CUS / G/S |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Walk In | <input type="checkbox"/> Call If Problem |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Mail Out | <input type="checkbox"/> Will Wait |
| <input type="checkbox"/> Mail Out | | <input checked="" type="checkbox"/> After 4:30 |
| | | <input checked="" type="checkbox"/> Pick Up |

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FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 21, 1995

C T SYSTEM

SUBJECT: CR MANAGEMENT SERVICES, INC.
Ref. Number: W9500006241

We have received your document for CR MANAGEMENT SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

If you would like a stamped photocopy returned to you, please be sure to submit a photocopy of the corrected original.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers
Document Examiner

Letter Number: 395A00012620

CERTIFIED COPY OF RESOLUTION

CORPORATION ADOPTING A FICTITIOUS NAME FOR USE
IN THE STATE OF FLORIDA

I, the undersigned, do hereby certify that the following is a true, complete and correct copy of a certain resolution of the board of directors of CR MANAGEMENT SERVICES, INC., a corporation duly organized and existing under the laws of the state of New York, which resolution was duly adopted at a duly called meeting of the said board, held on March 14, 1995, a quorum being present, and is set forth in the minutes of the said meeting: that I am the keeper of the corporate seal and of the minutes and records of this corporation; and that the said resolution has not been rescinded or modified:

"RESOLVED that CR MANAGEMENT SERVICES, INC., organized and existing in the state of New York, hereby adopts the name CENTER MANAGEMENT SERVICES, INC. for use in the state of Florida for all purposes; and further resolved that the officers of the corporation are authorized and directed to take all steps that they deem necessary and appropriate to qualify the corporation to do business within the State of Florida under the name of CENTER MANAGEMENT SERVICES, INC.; and resolved further that all activities and business of the corporation within the State of Florida shall be carried out under the name CENTER MANAGEMENT SERVICES, INC."

In witness whereof, I have hereunto subscribed my name and affixed the seal of the said corporation, on this the 14 day of March, 1995.

[Signature] CHAIRMAN
(Signature)

**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. (Name of corporation must include 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. New York
(State or country under the law of which it is incorporated)

3. December 19, 1986 4. Perpetual
(Date of Incorporation) (Duration)

5. 1A-2977940
(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. 210 MARCUS BLVD., HAUPPAUGE, New York 11788
(Current mailing address)

8. TO PROVIDE MANAGEMENT SERVICES TO AUTHORIZED PROVIDERS OF HEALTH CARE.
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and street addresses of officers and or directors:

A. Directors:

Chairman: RICHARD FORMAN

Address: 17657 FOX BOROUGH LANE

BOCA RATON, Florida 33496

Vice Chairman: _____

Address: _____

Director: PHYLLIS LIBUTTI

Address: 291 BLACKHEATH ROAD

LIDO BEACH, New York 11561

Director: KAREN HOLLAND

Address: 615 EAST STATE STREET

LONG BEACH, New York 11561

President RICHARD FORMAN
 Address 11501 FOX ECHOUGH LANE
BOCA RATON, FLORIDA 33496

Vice President PHYLLIS LEBOUTI
 Address 241 BLACKHEATH ROAD
LIDO BEACH, NEW YORK 11561

Secretary KAREN HOLLAND
 Address 615 EAST STATE STREET
LONG BEACH, NEW YORK 11561

Treasurer KAREN HOLLAND
 Address 615 EAST STATE STREET
LONG BEACH, NEW YORK 11561

(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: C T Corporation System
 Office Address: c/o C T Corporation System, 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: Connie Bryan
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
 (Typed Name and Title of Officer)

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. Richard Forman CHAIRMAN/PRESIDENT
 (Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. RICHARD FORMAN, President
 (Name and capacity of person signing application)

State of New York. } ss:
Department of State

I hereby certify, that the certificate of incorporation of CR MANAGEMENT SERVICES INC. was filed on 12/19/1986, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 14th day of March
one thousand nine hundred and
ninety-five.

Alexander F. Treachsel

Secretary of State

199503150141

SECRET
DIVISION OF CORPORATIONS
MAR 21 PM 3:00