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Acknowledgment

W.P. Verliet

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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.	. AHI HEALTHCARE SYSTEMS, INC. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORA	7:01/5
	words or abbreviations of like import in language as will clearly indicate that it is a corporat of a natural person or partnership if not so contained in the name at present.)	in instead
2.	. <u>California</u> 3. 95-415858	3
	(State or country under the law of which it is incorporated) (FEI number, if	
4.	. August 19, 1987 5. Perpetual	
	(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetua	) <del>[*)</del>
6.	Upon Qualification	
	(Date first transacted business in Florida, (See sections 607.1501, 607.1502 and 817.156	i, F.S.))
7.	. 12620 Erickson Avenue, Suite A	
	Downey, CA 90241	
	(Current mailing address)	
8.	Delivery of integrated healthcare systems and other non med	dical
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state Florida) administrative functions	of 95
9.	Name and street address of Florida registered agent:	Echen Sion o
	Name: <u>C T CORPORATION SYSTEM</u>	Hd II
	Office Address: <u>c/o C T Corporation System, 1200 South Pine Island Ro</u>	
	Plantation , Florida, 33324 (Zip Code)	Tions 25
0.	Registered agent 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.

C T CORPORATION SYSTEM
Degistered agent's signature) (Officer)
Thomas C. Totaro
(Type Name and Title of Officer)
Assistant Vice President

11. Attached is a certificate of existence duly	authenticated, not r	more than 90	days prior to
delivery of this application to the Department of	State, by the Secret	ary of State or	other official
having custody of corporate records in the jurisdi	ction under the law	of which it is i	ncorporated.

### 12. Names and addresses of officers and/or directors:

### A. DIRECTORS

		Chairman: _	<del></del>	See	rider	attache	d	 	
		Address:		·			<del></del>	 	
		Vice Chairm	an:					 	
		Address:							
		Director:			-			 	
		Address:							
		Director:	· · · · · · · · · · · · · · · · · · ·					 	
		Address:						95	- 12
В.	OFFICERS	<del></del>			<del> </del>		<del></del>	 SAPR II, PI	DIAISION OF
		President: _	'				· · · · · · · · · · · · · · · · · · ·	 70	2007 1000 1000 1000
		Address:						 	STATE
		Vice Preside	nt:					 `	n
		Address:							
		Secretary: _							
		Address:							

	Treasurer:								
	Address:								
		-	•,						
NOTE: If ne	acessary, you ma	v attach	n an addi	endun	to the ann	lication	istina ed	ditional	
and/or direct	tors.						isting au	attional	Officers
13. Signature	C								
	& Chelman, Vice					nber 12 o	f the appi	ication)	
14. <u>Leo</u>	nardo A. Ber	ezovsk	y, M.D	. Cha	airman				
no beqyT).	printed name and	capacity (	of person	signin	application)			•	

DIVISION OF CORPORATIONS

95 APR 14 PH 1: 25

### AH! HEALTHCARE SYSTEMS, INC. DIRECTORS AND OFFICERS

### DIRECTORS:

Leonardo A. Berezovsky, M.D., Chairman 12620 Erickson Avenue, Suite A Downey, CA 90241

Jose Spiwak, M.D. 12620 Erickson Avenue, Suite A Downey, CA 90241

Kaushal Tamboli, M.D. 12620 Erickson Avenue, Suite A Downey, CA 90241

Charles Klieman, M.D. 12620 Erickson Avenue, Suite A Downey, CA 90241

Saul Honigstein 12620 Erickson Avenue, Suite A Downey, CA 90241

# AFR III FII I:

SECRETARY OF STATE
DIVISION OF COMMANDAS

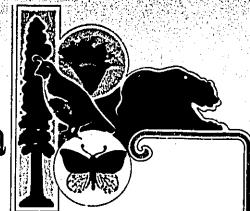
#### **OFFICERS**

Name and Address	Office	Date of Taking Office
Leonardo A. Berezovsky, M.D. 12620 Erickson Avenue, Suite A Downey, CA 90241	Chairman of the Board	April 26, 1994
Kaushal Tamboli, M.D. 12620 Erickson Avenue, Suite A Downey, CA 90241	Secretary	April 26, 1994
Jose Spiwak, M.D. 12620 Erickson Avenue, Suite A Downey, CA 90241	Chief Financial Officer	April 26, 1994
Saul Honigstein 12620 Erickson Avenue, Suite A Downey, CA 90241	Chief Executive Officer	April 26, 1994



# State

SECRETARY OF STATE'S OFFICE



### **CERTIFICATE OF STATUS** DOMESTIC CORPORATION

	of State of the State of California, hereby certify: day ofAUGUST		, 1987
	AHI HEALT	HCARE SYSTEMS, INC.	
became incorporated under office; and	the laws of the St	ate of California by filing its Article	es of Incorporation in this

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, 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 this corporation.



IN WITNESS WHEREOF, I execute ? this certificate and affix the Great Seal of the State of California this

day of APRIL 1995 13TH

Secretary of State

200 1831 95 107 22 --ill ... C T CORPORATION SYSTEM flectionaler's Harris 660 East Jefferson Street Address Tallalussee, Florida 32301 2000001646662 -11/29/95--01007--004 Chy State Zlp \*\*\*\*\*\*\*\* 00 \*\*\*\*\*\*\*\* Phone 904-222-1092 CORPORATION(S) HAME AHI Healthcore () Profit () MonProfit () bimited biobility Company () Amendment () Merger () Foreign lewe in this Windindoe (CA) () Mark () Limited Pertnership ( ) Neineletement () Aiwwel Report Ollier () fleservallon () Change of R.A. () Certified Copy

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## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

AHI Healthcare Systems, Inc.	
(Name of Corporation)	
California	ي ري
(Incorporated Under Laws Of)	
·	
This corporation is no longer transacting business or conducting Florida and hereby voluntarily surrenders its audit of the conduction.	og affairs within the State of
Florida and hereby voluntarily surrenders its authority to transa in Florida.	ct business or conduct affairs
- <del></del>	
This are	
This corporation revokes the authority of its registered agent in behalf and appoints the Department of State as its agent for se cause of action arising during the time it was authorized to tranfairs in Florida.	
The following is a current mailing address to which the Departmany process against this corporation that may be served on the 12620 Erickson Avenue, Suite A,	nent of State may mail a copy of Department.
(Mailing Address)	
Downey, CA 90241	
(City - State - Zip)	
The corporation agrees to notify the Department of State in the ing address.	future of any change in its mail-
- Muddle Comment	1 1
Signature	Date
Saul A. Honigstein	
Typed or printed name	•
President	•
Title	