

F95000001869

MANAGED HEALTH SYSTEMS 2000, INC.
1 SLEEPY HOLLOW RD.
MARY ESTHER, FL. 32569

200001452892
-04/11/95--01035--015
*****70.00 *****70.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

~~W95-1849~~

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

54/18

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DIVISION OF CORPORATIONS
95 APR 18 AM 10:26

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

April 12, 1995

MANAGED HEALTH SYSTEMS 2000, INC.
#1 SLEEPY HOLLOW RD.
MARY ESTHER, FL 32569

SUBJECT: MANAGED HEALTH SYSTEMS 2000, INC.
Ref. Number: W95000007849

We have received your document for **MANAGED HEALTH SYSTEMS 2000, 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):

There is a second page to the application that was missing when received it. I have enclosed a blank one for your convenience. Please complete officer/director page and resubmit it as soon as possible.

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) 487-6094.

Steven Harris
Corporate Specialist

Letter Number: 195A00016710

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE
STATE OF FLORIDA:**

1. MANAGED HEALTH SYSTEMS 2000, 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. LOUISIANA
(State or country under the law of which it is incorporated)
3. 72-1281528
(FEI number, if applicable)
4. 9-23-94
(Date of Incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. JANUARY 20, 1995
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.))
7. #1 SLEEPY HOLLOW ROAD
MARY ESTHER, FL. 32569
(Current mailing address)
8. Any lawful activity for which corporations may be formed under Bus. Corp.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida) Law.
9. Name and street address of Florida registered agent:
Name: ERNEST SYLVESTER
Office Address: #1 SLEEPY HOLLOW ROAD
MARY ESTHER, , Florida , 32569
(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.

X

(Registered agent's signature)

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:

A. DIRECTORS

Chairman: Ernest J. Sylvester
Address: #1 Sleepy Hollow Road
Mary Esther FL 32569

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Ernest J. Sylvester
Address: #1 Sleepy Hollow Road
Mary Esther, FL 32569
Vice President: S. Renee DeVincet
Address: 18304 Old Covington Hy
#2 Hammond LA 70403

Secretary: Beth M. Sylvester
Address: #1 Sleepy Hollow Rd
Mary Esther, FL 32569

Treasurer: Beth M. Sylvester
Address: #1 Sleepy Hollow Road
Mary Esther, FL 32569

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

13. Ernest J. Sylvester
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. President
(Typed or printed name and capacity of person signing application)

UNITED STATES OF AMERICA
State of Louisiana

Jax McKeithen
SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that
MANAGED HEALTH SYSTEMS 2000, INC.

A Louisiana corporation domiciled at Mandeville,

Filed charter and qualified to do business in this State on
September 27, 1994,

I further certify that the records of this Office indicate
the corporation has paid all fees due the Secretary of
State, and so far as the Office of the Secretary of State is
concerned is in good standing and is authorized to do
business in this State.

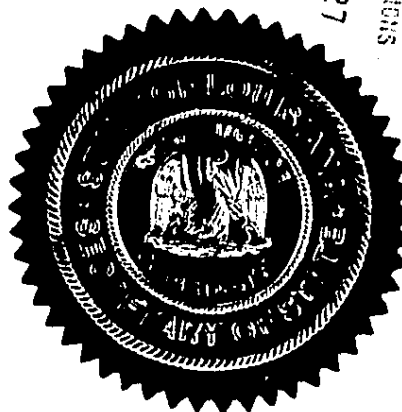
I further certify that this Certificate is not intended to
reflect the financial condition of this corporation since
this information is not available from the records of this
Office.

*In testimony whereof, I have hereunto set
my hand and caused the Seal of my Office
to be affixed at the City of Baton Rouge on,*

April 4, 1995

Jax H. McKeithen
SFO

Secretary of State



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