

F95000005711

C T CORPORATION SYSTEM
Requestor's Name
660 East Jefferson Street
Address
Tallahassee, Florida 32301
City State Zip Phone
904-222-1092
CORPORATION(S) NAME

11/22/75 11:22 AM
*****00.00 *****00.00

Spectrum Primary Care, Inc.
Tallahassee, Florida

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

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

11/22/75
3:00

PLEASE RETURN EXTRA COPY(S)
FILE STAMPED

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
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. Spectrum Primary Care, 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. 43-1689641

(FEI number, if applicable)

4. August 30, 1994

(Date of Incorporation)

5. Perpetual

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

6. Upon Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.106, F.S.))

7. 12647 Olive Street, St. Louis, Missouri 63141

(Current mailing address)

8. Provision of primary care health services.

(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: C T Corporation System

Office Address: c/o C T Corporation System, 1200 South Pine
Inland Road

Plantation, Florida, 33324

(Zip Code)

10. 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 obligation of my position as registered agent.

C T Corporation System

(Registered agent's signature) (Officer)

Frank T. Stephens, Asst. Vice President

(Type Name and Title of Officer)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: see attached list of directors

Address: _____

Vice Chairman: see attached list of directors

Address: _____

Director: see attached list of directors

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: see attached list of officers

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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TALLAHASSEE, FLORIDA

Treasurer: _____

Address: _____

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

13. Adrienne Sametz
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Adrienne Sametz, Vice President
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**Appendix to
Application for Authority**

**Directors and Officers of
Spectrum Primary Care, Inc.**

**The address for all directors and officers is 12647 Olive Street, St. Louis, MO 63141,
unless otherwise indicated.**

1. Richard H. Milos, President and Director
2. James W. Moore Executive Vice-President
3. Adrienne Sametz, Vice-President and Secretary
4. Cathy Vivirito, Vice-President
5. Michael Taylor, Vice-President
6. Sally A. Powers, Vice-President and Director
7. Allen Good, Treasurer
8. Jack Porvaznik, Medical Director
9. Kimber L. Durr, Assistant Secretary
10. Rowana Schwamb, Assistant Secretary
11. Ruth E. Kim, Assistant Secretary
12. Tracy L. Bartoli, Assistant Secretary
13. Melvin M. Mahoney, Director
1101 Market Street
Philadelphia, PA 19107

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TALLAHASSEE, FLORIDA

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SPECTRUM PRIMARY CARE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Edward J. Freel

Edward J. Freel, Secretary of State

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AUTHENTICATION:

7642794

DATE:

09-18-95