# F9500005729

11.

TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS

500001624095 -10/31/95--01023--008 '\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Chamberlin, Edmonds & Associates, Inc.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Walter N. Cohen
(Name of Person)

(Firm/Company)

750 Hammond Dr. Bld. 4 Suite 300
(Address)

Atlanta, Georgia 30328
(City, State and Zip Code)

Should you need to call someone concerning this matter, please call:

Walter N. Cohen
(Name of Person)

Area Code & Daytime Telephone Number

COURIER ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations 409 E. Galnes St. Tallahassee, FL 32399 MAILING ADDRESS:

Qualification/Tax Lien Sec. Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

## 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. Chamberlin, Edmonds & Associates, 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.)
or parallelating in not so contained in the name at presently
2. Georgia 3. 58-2148666
2. State or country under the law of which it is incorporated)  3. 58-2148666  (State or country under the law of which it is incorporated)  4. FEI number, if applicable)
4. May 22, 1986 5. Perpetual
4. May 22, 1986 (Date of Incorporation)  6. Perpetual (Duration: Year corp. will coase to exist or "perpetual")  6. January 1, 1996
6. <u>January 1, 1995</u> (Date first transacted business in Florida. (See sections 607,1501, 607,1502, and 817,155, F.S.)
7. 17 Executive Park Dr. South Suite 490
Atlanta, Gerogia 30329
(Current mailing address) 中央
on ∃⊟
8. To render services to hospitals and their affiliates in the collection of patient accounts (Purposals) of corporation authorized in home state or country to be carried out in the state of Florida)
The second of corporation additionated at notice state of country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:
Name: Kim Moore
Name: Kim Moore  Voffice Address: 1600 Spring Lake dr
Volide Address: 1000 Charm Edde Ole
Orlando , Florida , 32804 (Zip Code)
(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

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.

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.

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add	es and addresses of officers and/or directors: (Stress ONLY- P. O. Box NOT acceptable)	
	ECTORS (Street address only- P. O . Box NOT acceptab	10)
Address:	Judith E. Starkey 17 Executive Park South - Suite 490	
	Atlanta, Georgia 30329	<del></del>
Vice Chair	cman:	
Address: _	<del></del>	
		95 VISION 18
Director:		n Sig
Address: _	······································	
-		7 g
Director:		# 원 # 원
	· ·	<u>, , , , , , , , , , , , , , , , , , , </u>
		<del>3 -</del> §
Address:	Judith E. Starkey  17 Executive Park South - Suite 490  Atlanta, Georgia 30329  dent:	
Secretary: Address:	Charlynn C. Robinson 17 Executive Park South - Suite 490	<del></del>
<del></del>	Atlanta, Georgia 30329	
Treasurer:	Judith E. Starkey	
Address:	17-Executive Park South - Suite 490 Atlanta, Georgia 30329	
13 Cu	ecessary, you may attach an addendum to the applicati itional officers and/or directors.	
77	ture of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	er
14. Taesie	or printed name and capacity of person signing application)	_

#### Secretary of State Rupiness Enformation and Services Suite 315, West Tower 2 Martin Unther King Ir. Ar. Atlanta, Georgia 30334-1530

BOCKET NUMBER : 952850890
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DATE INC/AUTH/FILED: 05/22/1986
JURISDICTION : GEORGIA
PRINT DATE : 10/12/1995
FORM NUMBER : 211

WALTER COHEN
750 HAMMOND DRIVE, BLDG 4, STE 300
ATLANTA GA 30328

SECRETARY STATES OF STATES

#### CERTIFICATE OF EXISTENCE

I, MAX CLELAND, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

### CHAMBERLIN, EDMONDS & ASSOCIATES, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filling and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation, or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a netice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up, or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

MAX CLELAND

SECRETARY OF STATE

