

F95000005790

Document Number Only

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

*****00.00 *****00.00

Mariner Health of Seminole County, Inc.

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SECRETARY OF STATE

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☐ NonProfit
☐ Limited Liability Company
☒ Foreign
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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. Mariner Health of Seminole County, 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. applied for

(FEI number, if applicable)

4. November 7, 1995

(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 817.156, F.S.))

7. 125 Eugene O'Neill Drive

New London, CT 06320

(Current mailing address)

8. to provide health care related 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: CT Corporation System

Office Address: c/o CT Corporation System, 1200 South Pine Island 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.

CT Corporation System

Tanya M. Villar

(Registered agent's signature) (Officer)

TANYA M. VILLAR
SPECIAL ASSISTANT SECRETARY

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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: Arthur W. Stratton, Jr., M.D.

Address: c/o Mariner Health Group, Inc.

125 Eugene O'Neill Drive, New London, CT 06320

Vice Chairman: Nancy L. Stratton

Address: c/o Mariner Health Group, Inc.

125 Eugene O'Neill Drive, New London, CT 06320

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Arthur W. Stratton, Jr., M.D.

Address: See Above

Vice President: Jennifer B. Gallagher

Address: c/o Mariner Health Group, Inc.

125 Eugene O'Neill Drive, New London, CT 06320

Secretary: Nancy L. Stratton

Address: See Above

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STAFF

Treasurer: Jeffrey W. Kinell

Address: c/o Melcor Health Group, Inc.

125 Brian O'Neill Drive, New London, CT 06320

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

13. 

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

14. Jeffrey W. Kinell, Treasurer

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

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-REGISTRARS

State of Delaware
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MARINER HEALTH OF SEMINOLE COUNTY, 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 TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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DELAWARE



A handwritten signature in cursive script, reading "Edward J. Freel".

Edward J. Freel, Secretary of State

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AUTHENTICATION:

7724583

DATE:

11-28-95