

ACCOUNT NO.

REFERENCE : 000445

AUTHORIZATION

COST LIMIT : \$ 70.00

ORDER DATE: January 11, 1996

ORDER TIME :

11:43 AM

ORDER NO. : 800445

CUSTOMER NO:

5023143

300001688593

CUSTOMER:

Mr. Larry L. Berenger Gateway Healthcare Corporation

2900 Hungary Rd.

Ste. 200

Richmond, VA 23228

W76-1049

FOREIGN FILINGS

NAME:

GATEWAY HEALTHCARE CORPORATION

XXXX QUALIFICATION

(TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: ANDREA MABRY

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 12, 1996

CSC

SUBJECT: GATEWAY HEALTHCARE CORPORATION Ref. Number: W96000001049

Thaulis

We have received your document(s) in this office, however, the document is being returned for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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.

Doug Dickinson Document Specialist

Letter Number: 996A00001756

DIVISION OF CORPORATIONS

96 FEB -6 AM II: 31

INHS12 3/93)

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:

I. GADE	WAY HEALTHCHAE COM	non rzou	
(Name of co abbreviation person or pa	rporation: must include the word "INCORPOR s of like import in language as will clearly indi- rtnership if not so contained in the name at pre-	RATED", "COMPANY", "CORPORATION" or words cate that it is a corporation instead of a natural esent.)	or
2. VILLG	DV T/I-	9 9 mg 1 1 mg 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. VILG DATA (State or country under the law of which it is incorporated)		3. 39-7321999	
4. 0-10	Den 51, 1989	5 P-1 D-514	
4. October \$1,1989 (Date of Incorporation)		(Duration; Year corp. will cease to exist or "nerroting	187
6. //	15/96 transacted business in Florida. (SEE SECTIONS	perpetua	.,
(Date firs	transacted business in Florida. (SEE SECTIONS	8 607.1501. 607.1502. AND 817.155. E.S.)	
	·		
7	HUNCAMY FORD STE	200 RECHMOND, VA 2322	6
 	(Current mailin	g address)	
		•	
8. DESTREP	WIE DESPOSABLE MEN	TEAL SUPPLIES TO NYKSENG	
(Purpose(s) of c	corporation authorized in home state or country	y to be carried out in the state of	itoj ues
9. Name and a acceptable)	street address of Florida registered	agent: (P.O. Box or Mail Drop Box NOT	
Name:	The Prentice-Hall Corporation	System, Inc.	
Office Address:	1201 Hays Street, Suite 105	System, Inc.	
_	Tallahassee	, Florida , 32301	335
10 Pegistered	agent's acceptance:	(Zip Code)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	•		ř.
Having been na	med as registered agent and to accept	n, I hereby accept the appointment as	m -
corporation at the	he place designated in this application	n, I hereby accept the appointment as	
all atatatan mal-t	The Tour to det in this capacity, 1 j	uriner agree to comply with the provisions of	•
and accept the o	bligations of my position as registered The Prentice-Hall Corporation	mance of my duties, and I am familiar with d agent.	
	The Prentice-Hall Corporatio	n System Inc.	
В	The Prentice-Hall Corporation y: (Registered agent's Acceptificate of existence duly authenticular application to the Department of St	our last Com	
	(Registered agent's	signature)	
II. Attached is a	certificate of existence dustrant	Hauner	
delivery of th	is application to the Department of St	cated, not more than 90 days prior to late, by the Secretary of State or other	
omciai havinj	g custody of corporate records in the i	jurisdiction under the law of which it is	
incorporated.	·		

12. Names and addresses of officers and/or directors: (Street address ONLY-P.O. Box NOT acceptable) A. DIRECTORS (Street address only- P. O . Box NOT acceptable) Chairman: CHARLES L. PALMER RIVER RUPE FT MUDITIME FL 33305 Address: 2205 MEDDLE Vice Chairman: R. Daven Berchouth Address: 443 W. ALDINE APT I CHTC460 IL 60657 Director: Amon L. Bosonigon Address: 120 75 For FORE Concie Rechard VA 23233 Director: Eduana Strumal Address: 5907 DMECRISS CLON ALLON, VA 23060 B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: Epwaro Siturna Address: 5907 DACCHOSS GLEN ALLOW , VA 230 60 Vice President: ROBERT L. UND PRUWD + DIRECTOR Address: 59 400 LEY ROAD WINDETKA 60093 Secretary: _ R. Daven + DIRECTOR BENGUNIA Address: ________w. ALDINE APT 1 CHILLGO IL 60657 L BENOWGER Address: 12075 FOXFIELD CIRCLE RECHNEWAS, VA 23233 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Vice Chairman, or my officer listed in number 12 of the application)

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

14. LARING L. BENEVEEN

VICE PRESIDENT FOUNCE & OPENATIONS

Commission of Alphanian Commission of the Commis



State Corporation Commission

I Certify the Following from the Records of the Commission:

Gateway Healthcare Corporation is a corporation existing under and by virtue of the laws of Virginia, and is in good standing.

The date of incorporation is October 31, 1989.

Nothing more is hereby certified.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 FFR - 6 MM II: 32



Signed and Sealed at Richmond on this Pate: November 29, 1995

William J. Hridge, Clerk of the Commission