

F96000000769

CORPORATION NAME(S) INC.
 1 D. J. THOMAS, JR.
 TALLAHASSEE, FL 32303
 (904) 222-2600

Address *H. Glinder*
 City/State/Zip Phone #

400001715544
 -02/15/96--01020--007
 *****70.00 *****70.00

Office Use Only

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

1. Am Surg. Dist. County, Inc.
 (Corporation Name) (Document #)
2. _____
 (Corporation Name) (Document #)
3. _____
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

- ☒ Walk in ☒ Pick up time *2/15/96 11:00* ☒ ~~Document~~ Copy
☐ Mail out ☐ Will wait ☐ Photocopy *2/15/96* ☐ Certificate of Status

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 96 FEB 15 AM 10:34
LA 415

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

File First
 RECEIVED
 96 FEB 15 AM 11:00
 DIVISION OF CORPORATION

**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. AmSurg Dade County, Inc.
(Name of corporation: the word "INCORPORATED," "COMPANY," or "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. Tennessee
(State or country under the law of which it is incorporated)
3. January 17, 1996 4. perpetual
(Date of Incorporation) (Duration)
5. 62-1626021
(Federal Employer Identification number, if applicable)
6. Upon qualification
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)
102 Woodmont Boulevard, Suite 500, Nashville, TN 37205
7. _____
(Current mailing address)
8. Ambulatory Surgerv Center
(Corporate purpose and nature of business in which it is engaged in Florida)
9. Names and addresses of officers and or directors:
A. Directors:
Chairman: see attached
Address: _____

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

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I. Board of Directors

Rodney H. Lunn
Henry Herr

II. Officers

President	Tom Cigarran
Secretary	Henry Herr
Vice President and Treasurer	Claire Gulmi
Assistant Secretary and Vice President	Royce Harrell
Vice President	Ken McDonald

All of the above people are located at:

102 Woodmont Boulevard
Suite 500
Nashville, TN 37205

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B. Officers:

President: see attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

10. Name and Street address of Florida registered agent:

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
Zip Code: 33324

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11. 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.

Registered agent's signature: [Signature]
As its Agent

12. 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.

13. X Clem M. Guini, VP
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Vice President
(Name and capacity of person signing application)

**Secretary of State
Corporations Section**

**James K. Polk Building, Suite 1800
Nashville, Tennessee 37243-0306**

ISSUANCE DATE: 02/12/96
REQUEST NUMBER: 96043125
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 01/17/1996
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0306036
JURISDICTION: TENNESSEE

TO:
CAPITAL FILING SERVICE, INC.
7051 HWY 70 SO
#333
NASHVILLE, TN 37221

REQUESTED BY:
CAPITAL FILING SERVICE, INC.
7051 HWY 70 SO
#333
NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"AMSURG DADE COUNTY, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE,
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID,
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED, AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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FOR: REQUEST FOR CERTIFICATE

ON DATE: 02/12/96

FROM:
CAPITAL FILING SERVICE, INC.
7051 HWY 70 S
#333
NASHVILLE, TN 37221-0000

RECEIVED:	FEES	
	\$20.00	\$20.00
TOTAL PAYMENT RECEIVED:		\$40.00

RECEIPT NUMBER: 00001909180
ACCOUNT NUMBER: 00101230



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE