



1201 HAYS STREET
TALLAHASSEE, FL 32301

800-342-8086

F96000001774

ACCOUNT NO. : 072100000032

REFERENCE : 863930 4306424

AUTHORIZATION :

Patricia. P. P. P.

COST LIMIT : \$ 122.50

ORDER DATE : February 20, 1996

ORDER TIME : 10:20 AM

400001748474

ORDER NO. : 863930

CUSTOMER NO: 4306424

7000001779177
-04/15/96--01013--014
***1200.00 ***1200.00

CUSTOMER: Ms. Kathy Gonsalves
Steel Hector & Davis
41st Floor, Ste. 4000
200 S. Biscayne Boulevard
Miami, FL 33131-2398

W96-5875

FOREIGN FILINGS

NAME: RESPONSE ONCOLOGY MANAGEMENT
OF SOUTH FLORIDA, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Victoria L. Perez

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 MAR 19 PM 12:18
384/9



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

March 19, 1996

CSC NETWORKS

RESUBMIT

Please give original
submission date as file date.

SUBJECT: RESPONSE ONCOLOGY MANAGEMENT OF SOUTH FLORIDA,
INC.
Ref. Number: W96000005875

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

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$1200.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business or conducting affairs in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business or conducting its affairs in Florida prior to the year the application was submitted did not constitute transacting business or conducting affairs pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (904) 487-6095.

Jennifer Sindt
Document Examiner

Letter Number: 196A00012426

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
RECEIVED MAR 19 PM 12:18
5:12 PM 12:00
DIVISION OF CORPORATIONS

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO 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. RESPONSE ONCOLOGY MANAGEMENT OF SOUTH FLORIDA, 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 named 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. 62-1603099

(FEI number, if applicable)

4. 5-10-95

(Date of incorporation)

5. PERPETUAL

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

6. 8/4/95

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.1505, F.S.))

7. 1775 Moriah Woods Boulevard

Memphis, TN 38117

(Current mailing address)

8. Establish insurance marketing network of physicians

(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: JOHN J FERRELLI

Office Address: 3449 JOHNSON STREET

HOLLYWOOD, FL

Florida, 33021

(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 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.

John J Ferrelli

(Registered agent's signature)

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.

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DIVISION OF CORPORATIONS
95 MAR -9 PM 12:26

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____
_____FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR -9 PM 12:26

B. OFFICERS

President: Joseph T. Clark Joseph T. ClarkAddress: 1775 Moriah Woods Boulevard
Memphis, TN 38117

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13.

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

14.

Joseph T. Clark
(Typed or printed name and capacity of person signing application)

**Secretary of State
Corporations Section**

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

ISSUANCE DATE: 03/18/1996
REQUEST NUMBER: 96078001
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 05/10/1995
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0294573
JURISDICTION: TENNESSEE

TO:
THE SEARCH IS ON
PO BOX 120598

NASHVILLE, TN 37212

REQUESTED BY:
THE SEARCH IS ON
PO BOX 120598

NASHVILLE TN 37212

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"RESPONSE ONCOLOGY MANAGEMENT OF SOUTH FLORIDA, 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 MAR 19 PM 12:18

FOR: REQUEST FOR CERTIFICATE

ON DATE: 03/18/96

FROM:
TSIO (BOX 120598)
P. O. BOX 120598

NASHVILLE, TN 37212-0000

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

RECEIPT NUMBER: 00001928587
ACCOUNT NUMBER: 00000499



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE