

Document Number Only

F96000003165

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

400001871484
-06/21/96--01069--025
*****70.00 *****70.00

400001871484
-06/26/96--01095--001
*****8.75 *****8.75

CNA Health Partners, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JUN 2 PM 2 48

☒ Profit

☐ NonProfit

☐ Limited Liability Co.

☒ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Certified Copy

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☐ Dissolution/Withdrawal

☐ Annual Report

☐ Reservation

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6-21

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. CNA Health Partners, 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. Illinois

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. June 12, 1996

(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. CNA Plaza, 43S, Chicago, Illinois 60685

(Current mailing address)

8. See attached purpose clause

(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: C T Corporation System

Office Address: c/o C T 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.

C T Corporation System


(Registered agent's signature) (Officer)

Francis P. Ryan, Asst. Secretary
(Type Name and Title of Officer)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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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: Joe L. Wittlich

Address: CNA Plaza, 405
Chicago, Illinois 60685

Vice Chairman: _____

Address: _____

Director: Thomas B. Johnson

Address: CNA Plaza,
Chicago, Illinois 60685

Director: Glenn A. Mateja

Address: CNA Plaza, 445
Chicago, Illinois 60685

B. OFFICERS

President: See attached list of officers

Address: _____

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.

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

14. Mary A. Ribikawakia, Secretary

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

Appendix to Florida
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Purpose Clause of
CNA Health Partners, Inc.**

The transaction of any or all lawful business for which corporations may be incorporated under the Business Corporation Act including performing managed care services.

Appendix to Florida
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Officers of
CNA Health Partners, Inc.**

1. Thomas B. Johnson, Vice President
CNA Plaza,
Chicago, Illinois 60685
2. Joe L. Wittlich, Chairman of the Board
CNA Plaza, 40S
Chicago, Illinois 60685
3. Glenn A. Mateja, President
CNA Plaza, 44S
Chicago, Illinois 60685
4. Michael T. Gengler, Vice President
CNA Plaza, 43S
Chicago, Illinois 60685
5. Pamela S. Dempsey, Vice President & Treasurer
CNA Plaza, 41S
Chicago, Illinois 60685
6. Mary A. Ribikawskis, Secretary
CNA Plaza, 43S
Chicago, Illinois 60685

File Number 5890-714-6



To all to whom these Presents Shall Come, Greeting:

I, George H. Ryan, Secretary of State of the State of Illinois,
do hereby certify that CNA HEALTH PARTNERS, INC., A DOMESTIC
CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JUNE 12,
1996, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE
BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF
FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A
DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****



In Testimony Whereof, *I hereto set*
my hand and cause to be affixed the Great Seal of
the State of Illinois this 18TH
day of JUNE *A.D., 19* 96

George H. Ryan

SECRETARY OF STATE