ACCOUNT NO. : 072100000032

REFERENCE :

604608

7110150

AUTHORIZATION

COST LIMIT

\$ 70.00

ORDER DATE: November 18, 1997

ORDER TIME: 9:18 AM

ORDER NO. : 604608-005

CUSTOMER NO: 7110150

500002352685--3

CUSTOMER: Mr. James Patrick

National Healthnet Corporation 1900 Corporate Boulevard, N.w.

Suite 400w

Boca Raton, FL 33431

NAME: NH-SLMC, INC.

XXXX QUALIFICATION (TYPE: <u>CO</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Stscherban

NEE CE MC

## 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:

	ARIZONA  te or country under the law of which it is incorporated)  (FEI number, if applicable)	
	OCTOBER 29, 1997 5. PERPETUAL (Duration: Year-corp. will cease to exist or "perpet	
		u8i"}
	PENDING APPROVAL TO TRANSACT BUSINESS IN FLORIDA	
(Dat	e first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.)	<u> </u>
	1900 CORPORATE BLVD. NW., SUITE 400 WEST	Ē
_		N
	BOCA RATON, FLORIDA 33431	
	(Current mailing address)	
	HEALTHCARE, GENERAL BUSINESS	**
	(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT ceptable)  Name: Corporation Service Company	
	Office Address: 1201 Hays Street	
	Tallahassee , Florida, 32301	

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.

Registered agent's signature)

ביא ם

12.	Names and addresses of	officers	and/or	directors:	(Street a	iddress	ONLY-	P.O.	Box
	NOT acceptable)	•		÷					

A. DIREC	TOF	RS (Street address only- P.O. Box NOT acceptable)		
Chairman:	ERN	EST C. WILCOCK		<del>-</del>
Address:	982	MCCLEARY STREET		-
	DEL	RAY BEACH, FLORIDA 33483		_
Vice Chairn	nan:	JAMES E. PATRICK		-
Address:		2200 COCOANUT ROAD		_
		BOCA RATON, FLORIDA 33432	-	_
Director:		KAMALA CHAPMAN		
Address:		7327 TILIMAN DRIVE		_
		LAKE WORTH, FLORIDA 33467		<b>.</b> .
Director:				- '
Address:				-
				-
B. OFFICE	ERS	(Street address only- P.O. Box NOT acceptable)		0
President:		ERNEST C. WILCOCK	97 NO	-32E
Address:		982 MCCLEARY STREET	200	- <del>2</del> 2 2 2 -
,	•	DELRAY BEACH, FLORIDA 33483	<u> </u>	-23,
Vice Preside	ent:	JAMES E. PATRICK	72	्ड -हर्
Address:		2200 COCOANUT ROAD	**	
		BOCA RATON, FLORIDA 33432		- <del></del>
Secretary:		JEFFREY MALLON		_
Address:		1905 H LINTON LAKE DRIVE		
		DELRAY BEACH, FLORIDA 33445		<b>-</b> .
Treasurer:		·		~
Address:				_
,			·	~
NOTE: If no and/or direct	ecessa tors.	ary, you may attach an addendum to the application listing additional officers		
13				
	(8	lignature of Chairman, Vice Chairman, or any officer listed in number 12 of the application.	}	
14		ERNEST C. WILCOCK, CHAIRMAN		-
		(Typed or printed name and capacity of person signing application)		

## STATE OF ARIZONA



Office of the

## CORPORATION COMMISSION

To all to whom these presents shall come, greeting:

I, Jack Rose, Executive Secretary of the Arizona Corporation

Commission, do hereby certify that

\*\*\*NH-SLMC, INC. \*\*\*

a domestic corporation organized under the laws of the state of Arizona, did incorporate on October 29, 1997.

I further certify that this corporation has filed all affidavits and annual reports and paid all filing fees required to date and, therefore, is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the offical seal of the Arizona Corporation Commission. Done at Phoenix, the Capitol, this 19th day of November, 1997, A. D.



Executive Secretary

BY: In More