

98000003351

CORPORATE ACCESS, INC.

1110 S. Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 6/12/98



☒ **CERTIFIED COPY**

☒ **PHOTO COPY**

CUS

☒ **FILING** Qualification

- 1.) Pathology Partners of South Florida, Inc.
(CORPORATE NAME & DOCUMENT #)
- 2.) _____
(CORPORATE NAME & DOCUMENT #)
- 3.) _____
(CORPORATE NAME & DOCUMENT #)
- 4.) _____
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- 5.) _____
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- 6.) _____
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- 9.) _____
(CORPORATE NAME & DOCUMENT #)
- 10.) _____
(CORPORATE NAME & DOCUMENT #)

W98-13571

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*****70.00 *****70.00

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98 JUN 12 PM 3:08

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

DIVISION OF CORPORATION

6/12

SPECIAL INSTRUCTIONS



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

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98 JUN 12 PM 1:26
DIVISION OF CORPORATION

June 12, 1998

CORPORATE ACCESS INC.

SUBJECT: PATHOLOGY PARTNERS OF SOUTH FLORIDA, INC.
Ref. Number: W98000013571

We have received your document for PATHOLOGY PARTNERS OF SOUTH FLORIDA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

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 (850) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 298A00033012

corrected
6/12
CR

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. Pathology Partners 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 instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware 3. applied for
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 5, 1998 5. perpetual
(Date of incorporation) (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 617.155, F.S.))

7. 5605 North McArthur Boulevard
Suite 870 Irving, Texas 75038
(Current mailing address)

8. medical management services
(Purposes) 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: NRAI Services, Inc.

Office Address: 526 E. Park Avenue

Tallahassee

, Florida , 32301

(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.

NRAI Services, Inc.

By: Charles A. Coyle

(Registered agent's signature)

Charles A. Coyle - Assistant Secretary

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.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

A. DIRECTORS

Chairman: Richard R. D'Antoni
 Address: 5605 McArthur Blvd, Suite 870
Irving, Texas 75038

Vice Chairman: _____
 Address: _____

Director: Harold W. Roe
 Address: 5605 McArthur Blvd. Suite 870
Irving, Texas 75038

Director: _____
 Address: _____

B. OFFICERS

~~CEO~~ President: Richard R. D'Antoni
 Address: 5605 McArthur Blvd. Suite 870
Irving, Texas 75038

~~Vice President:~~ Harold W. Roe
 Address: 5605 McArthur Blvd. Suite 870
Irving, Texas 75038

Secretary: Richard R. D'Antoni
 Address: 5605 McArthur Blvd. Suite 870
Irving, Texas 75038

Treasurer: _____
 Address: _____

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 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

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

13. Harold Roe
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Harold Roe - President
 (Typed or printed name and capacity of person signing application)

State of Delaware
Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PATHOLOGY PARTNERS OF SOUTH FLORIDA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF JUNE, A.D. 1998.

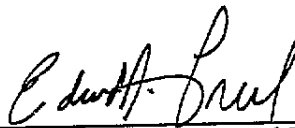
AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

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98 JUN 12 PM 3:03
SECRETARY OF STATE
DELAWARE



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Edward J. Freel, Secretary of State

AUTHENTICATION:

9132648

DATE:

06-11-98