

F98000003832



**BEST DOCTORS**<sup>TM</sup>  
WORLDWIDE HEALTHCARE SERVICES

June 26, 1998

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

500002575035--2  
-06/29/98--01094--011  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Re: Best Doctors, Inc. (SC)

Dear Sir or Madam:

You will find enclosed the application for Certificate of Authority to transact business in Florida for the above referenced corporation. Also attached is a Certificate of Existence from the state of South Carolina and our check in the amount of \$70.00.

Upon filing, please stamp filed the additional copy and return to my attention at 1359 Silver Bluff Road, Suite F-2, Aiken, South Carolina 29803. We will notify C T Corporation System of their appointment as registered agent.

If you have questions, please contact me at 800-675-1199. Thank you for your assistance in this matter.

Sincerely,

*Marial L. Ellis*

Marial L. Ellis  
Contract Specialist  
Best Doctors

W98-14955  
da 7/7/98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

June 30, 1998

THE BEST DOCTORS IN AMERICA  
C/O MARIAL L. ELLIS  
1359 SILVER BLUFF ROAD, SUITE F2  
AIKEN, SC 29803

SUBJECT: BEST DOCTORS, INC.  
Ref. Number: W98000014955

We have received your document for BEST DOCTORS, 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.)

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

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) 487-6094.

Agnes Lunt  
Document Specialist

Letter Number: 798A00035487

# 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:

Best Doctors, Inc.

1. \_\_\_\_\_  
(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. South Carolina  
(State or country under the law of which it is incorporated)

3. 58-2317785  
(FEI number, if applicable)

4. May 15, 1997 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 817.155, F.S.)

7. 1359 Silver Bluff Road, Suite F-2 Attn: Steve Little  
Aiken, South Carolina 29803  
(Current mailing address)

8. Contracting for the purposes of  
forming a network of specialty care physicians & affiliated hospitals  
(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

Mary R Adams

(Registered agent's signature) (Officer)

Mary R. Adams, Assistant Secretary

(Type Name and Title of Officer)

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 (Street address only - P.O. Box NOT acceptable)

Chairman: Steven W. Naifeh, CEO  
Address: 1359 Silver Bluff Road, Suite F-2  
Aiken, SC 29803

Director  
~~Vice Chairman~~: John Cahill  
Address: 1 Pepsi Way  
Somers, NY 10589

Director: George Conrader  
Address: 150 Cambridge Park Drive  
Cambridge, MA 02140

Director: Regina Herzlinger  
Address: 163 Baker Library, 25 Harvard Way  
Boston, MA 02163

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: Greg W. Smith  
Address: 1359 Silver Bluff Road, Suite F-2  
Aiken, SC 29803

Senior  
of Business Development  
Vice President: Suzy Tichenor  
Address: 1359 Silver Bluff Road, Suite F-2  
Aiken, SC 29803

Senior VP of Network Development  
Secretary: Gregg Coldiron  
Address: 1359 Silver Bluff Road, Suite F-2  
Aiken, SC 29803

Chief Financial Officer

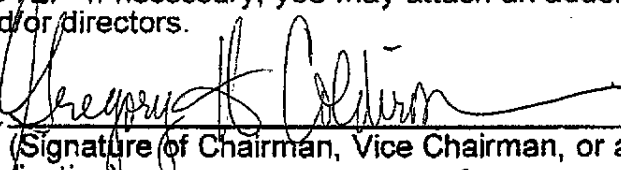
Treasurer:

Steve Little

Address: 1359 Silver Bluff Road, Suite F-2  
Aiken, SC 29803

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

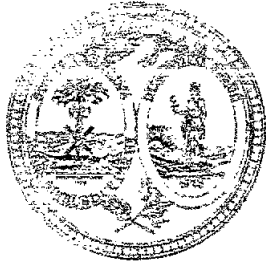
13.

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

14.

GREGORY H COLIRON SR. Vice-President of Network Development  
(Typed or printed name and capacity of person signing application)

# *The State of South Carolina*



## *Office of Secretary of State Jim Miles* **Certificate of Existence**

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

***BEST DOCTORS, INC.,***

a corporation duly organized under the laws of the State of South Carolina on **May 15th, 1997**, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of  
the State of South Carolina this 15th day of  
June, 1998.

A handwritten signature of Jim Miles in black ink, written over a horizontal line.

Jim Miles, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual report with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.