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October 28, 1998

VIA CERTIFIED MAIL #Z 508 078 322
RETURN RECEIPT REQUESTED

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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-11/03/98--01095--001
*****70.00 *****70.00

Re: Self-Funded Services, Inc.

Dear Sir/Madam:

Enclosed please find an Application by Foreign Corporation for Authorization to Transact Business in Florida and a Certificate of Good Standing for filing on behalf of the above-referenced corporation.

Also enclosed is this firm's check in the amount of \$70.00 in payment of the filing fee.

Kindly acknowledge receipt of this filing by date-stamping the enclosed copy of this letter and returning same in the envelope provided.

Very truly yours,

Martha Schwarz

Martha Schwarz
Legal Assistant

MS/erl
Enclosures

cc: Gary M. Edelson, Esquire

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DIVISION OF CORPORATIONS
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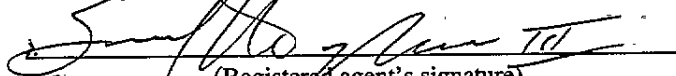
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. Self-Funded Services, 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. Pennsylvania
(State or country under the law of which it is incorporated)
3. 22-2540308
(FEI number, if applicable)
4. 06/18/84
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. 11/01/98
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 3310 Simpson Avenue
Ocean City, NJ 08226
(Current mailing address)
8. ownership of investments
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: Samuel W. Douglass, III
Office Address: 559 Neapolitan Lane
Naples, Florida, 34103
(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.


(Registered agent's signature)
SAMUEL W. DOUGLASS III

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: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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DIVISION OF CORPORATIONS
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A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: Samuel W. Douglass III

Address: 559 Neapolitan Lane

Naples, FL 34103

Vice Chairman: _____

Address: _____

Director: Samuel W. Douglass III

Address: 559 Neapolitan Lane

Naples, FL 34103

Director: Rose Douglass

Address: 559 Neapolitan Lane

Naples, FL 34103

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

President: Samuel W. Douglass III

Address: 559 Neapolitan Lane

Naples, FL 34103

Vice President: _____

Address: _____

Secretary: Rose Douglass

Address: 559 Neapolitan Lane

Naples, FL 34103

Treasurer: Samuel W. Douglass III

Address: 559 Neapolitan Lane

Naples, FL 34103

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

13. X 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
Samuel W. Douglass III, Chairman and President

14. _____

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

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

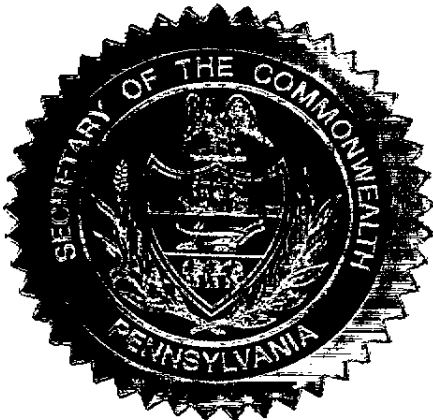
OCTOBER 26, 1998

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

SELF-FUNDED SERVICES, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania
and remains a subsisting corporation so far as the records of this office
show, as of the date herein.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's
Office to be affixed, the day
and year above written.

Shirley L. ...
Secretary of the Commonwealth

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