## Document Number Only 1000005214 CTIC orporation System

660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615

Attn: Jeff Netherton

CORPORATION(S) NAM	ME	00000300986 -10/08/990106; *****87.50 **:	:III —— 2 2004 ***87.50
ECS of Louisiana, A Prof	essional Medical Corporation		#
		99 OCT -	
(x) Profit ( ) Nonprofit	() Amendment	() Merger 字	
(x) Foreign	() Dissolution/Withdrawal () Reinstatement	ب ( ) Mark دن	
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Other () Change of RA () UCC	ζ.
(x) Certified Copy	() Photocopies	(x) CUS	
( ) Call When Ready (x) Walk In ( ) Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	
Name Availability	10/08/99		
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA** 

				0 200
IN COMPLIAN	CE WITH SECTION 607.1503, FLO	ORIDA STATU	TES, THE FOLLOWING IS SUBMITTE	EDGO 📆 .
REGISTER A F	OREIGN CORPORATION TO TRA	NSACT BUSIN	NESS IN THE STATE OF FLORIDA.	007 8 PH 3: 37
1. ECS o	f Louisiana, A Professiona	l Medical C	Cornoration	à 30
(Name of corp	oration; must include the word "INCOI	RPORATED" "	COMPANY" "CORPORATION" A	
words or abbre	eviations of like import in language as v	vili clearly indic	are that it is a corporation instead of a	7 72
natural person	or partnership if not so contained in the	e name at presen	t.)	ر بن
				2
	iana	<u> </u>	56-2106091	
(State or countr	y under the law of which it is incorpora	ated)	(FEI number, if applicable)	
4. Octob	er:15, 1998	<u> </u>	Perpetual	
(Da	ate of incorporation)	(Duration:	Year corp. will cease to exist or "perpetual	<u>")</u>
6. Octobe	er 15, 1999			
(Date firs	st transacted business in Florida.) (SEE	SECTIONS 60	7.1501, 607.1502 and 817.155, F.S.)	<del></del>
7. 2828	Croasdaile Drive			
7	GLOGOGUZZE DZZYE	_		
Durha	m, North Carolina 27705			<u></u>
	(Current mail	•		
To recruî	t and place professional h	ealthcare p	roviders with healthcare faci	lities and
·			fessionals.	- -
(Purpose	(s) of corporation authorized in home s	state or country to	o be carried out in state of Florida)	
9. Name and st	reet address of Florida registered	agent: (P.O.	Box or Mail Drop Box NOT acceptable	e)
		•		~
Name:	Jeffrey Schillinger		· Commence to the commence of	4
Office Address.	1001 Ives Dairy Road, Sui	+- 206		-
Office Address:	TOOL IVES DELLY KORG, SEL	CE 200	·	
	N. Miami Beach,		Florida, 33179	
			Florida, 33179 (Zip code)	
10 Pagistared	agent's acceptance:			
io. Registeren	agent's acceptance:			
Having been name	ed as registered agent and to accept se	rvice of process	for the above stated corporation at the pla	ice designated in
this application, I	hereby accept the appointment as regi	istered agent an	d agree to act in this capacity. I further as	ree to comply
with the provision the obligations of	s of all statutes relative to the proper a my position as registered agent.	ınd complete pei	rformance of my duties, and I am familiar	with and accept
me congunons by				
	Jeffry Marsh.	li~		
	(Rjegistered	ågent's signature	2)	
11. Attached is a	certificate of existence duly authenticate	ed, not more that	n 90 days prior to delivery of this application	m to the
Department of Stat	te, by the Secretary of State or other off	icial having cust	lady of corporate records in the jurisdiction	under the law of
<ol> <li>Attached is a comment of State</li> </ol>	certificate of existence duly authenticate	ed, not more that	e)  n 90 days prior to delivery of this application tody of corporate records in the jurisdiction	n to the under the law of
which it is incorpo	rated.		y	

A. DIREC	CTORS (Street address only - P.O. Box NOT acceptable)		2.0
Chairman:			<u> </u>
Address: _			8 650
	man:		- 6 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Address: _			<u> </u>
— Director: _	Bertram E. Walls, M.D.		
Address: _	2828 Croasdaile Drive		
_	Durham, North Carolina 27705		* , 525%
Director: _	:	* *	
Address: _			
	Bertram E. Walls, M.D.  2828 Croasdaile Drive  Durham, North Carolina 27705		
- Vice Presid	lent:		
- Secretary: ,	Bertram E. Walls, M.D. Assistant Se	cretary: Anita S.	Wegner
Address: _	2828 Craosdaile Drive	2828 Croa	asdaile Drive
_	Durham, North Carolina 27705	Durham, 1	NC 27705
Treasurer:	Bertram E. Walls, M.D.		
Address: _	2828 Croasdaile Drive		
_	Durham, North Carolina 27705		
NOTE: If	f necessary, you may attach an addendum to the application listing additional	officers and/or directors.	
13	ferfron Mal	10 -541''	
	(Signature of Chairman, Vice Chairman, or any officer listed in numb Bertram E. Walls, M.D., President	per 12 of the application)	
14	(Typed or printed name and capacity of person sign	ning application)	



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

ECS OF LOUISIANA, A PROFESSIONAL MEDICAL CORPORATION

A LOUISIANA corporation domiciled at BATON ROUGE,

Filed charter and qualified to do business in this State on October 15, 1998,

I further certify that the records of this Office indicate the corporation has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned is in good standing and is authorized to do business in this State.

I further certify that this Certificate is not intended to reflect the financial condition of this corporation since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

Sepaember A, 19

CAS 34696330D\_

Secretary of State

