



THE UNITED STATES
CORPORATION
COMPANY

1000000000770

ACCOUNT NO. : 072100000032

REFERENCE : 666296 7186305

AUTHORIZATION :

Patricia Pizutto

COST LIMIT : \$ 125.00

FILED
00 APR 19 PM 4:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 18, 2000

ORDER TIME : 10:40 AM

ORDER NO. : 666296-010

CUSTOMER NO: 7186305

100003214981--6

CUSTOMER: Ms. Mary Kim E. Shipp
Lifepoint Hospitals, Inc.
103 Powell Court
Suite 200
Brentwood, TN 37027

FOREIGN FILINGS

NAME: PUTNAM COMMUNITY MEDICAL
CENTER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Erika Carlson

RECEIVED
00 APR 19 PM 12:12
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE

100-770

SEARCHED	INDEXED
SERIALIZED	FILED
APR 19 2000	
TALLAHASSEE, FLORIDA	



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

April 19, 2000

ERIKA CARLSON
CSC

RECEIVED

Please give original

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 APR 19 PM 4: 58

FILED

SUBJECT: PUTNAM COMMUNITY MEDICAL CENTER, LLC
Ref. Number: W00000010356

We have received your document for PUTNAM COMMUNITY MEDICAL CENTER, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The registered agent must sign accepting the designation.

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) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 100A00021492

RECEIVED
00 APR 19 PM 4: 44
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Putnam Community Medical Center, LLC
(Name of foreign limited liability company)

2. Delaware 3. applied for
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)

4. April 10 2000 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to
exist or "perpetual")

6. after qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 103 Powell Court, Suite 200
Brentwood, TN 37027
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

LifePoint Holdings 2, LLC 103 Powell Court, Suite 200, Brentwood, TN 37027

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: healthcare services

W F Carpenter III
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes
an affirmation under the penalties of perjury that the facts stated herein are true.)

William F. Carpenter III
Typed or printed name of signee

FILED
NO APR 19 PM 4:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Putnam Community Medical Center, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32301

City/State/Zip

FILED
NO APR 19 PM 4: 58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


(Signature)
BRIAN COURTNEY, ASST. V.P.

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

State of Delaware
Office of the Secretary of State

PAGE 1

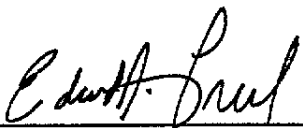
I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PUTNAM COMMUNITY MEDICAL CENTER, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF APRIL, A.D. 2000. _ _ _ _ _

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



3214206 8300

001197408


Edward J. Freel, Secretary of State

AUTHENTICATION:

0388634

DATE:

04-18-00