## (Sub Account) DATE: Lexis Document Services REQUESTOR 'HARE: ADDRESS: TELEPHONE: CONTACT NAME: Florida Heart-Orlando CORPORATION NAME: DOCUMENT NUMBER: (if applicable) CERTIFIED COPY (1-9) CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY 400003268424--9...

) Call When Ready ') Walk In ) Mail Out

) Call if Problum ) Will Wait

) After 4:30 ) Pick Up

11 11

SECRETAIN STAINS AND A STAIN A

00 HAY 26 PM 1:55

EIFFN



to miningspecies

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

| 1.   | Florida Heart - Orlando, LLC   |
|------|--|
|      | (Name of foreign limited liability company)  |
| 2.   | Ohio 3. Applied for  |
|      | Ohio (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)  |
| 4.   | May 8, 2000 5. perpetual   |
|      | (Date of Organization)  (Duration: Year limited liability company will cease to exist or "perpetual")  |
| 6.   | May 8, 2000  |
| _    | (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)   |
| 7.   | 765 North Hamilton Road  |
|      | Columbus, Ohio 43230  (Street address of principal office)   |
|      | (Street address of principal office)   |
| 8.   | If limited liability company is a manager-managed company, check here  |
| 9.   | The usual business addresses of the managing members or managers are as follows:   |
|      | c/o Ohio Heart   |
|      | 765 North Hamilton Road  |
|      | Columbus Ohis 42220  |
|      | Columbus, Onio 43230   |
|      |  |
| 10.  | Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in                                    |
| TIC. | julisticuloit tilicitat ine taw of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language a  |
| ran  | slation of the certificate under oath of the translator must be submitted.)  |
| l 1. | Nature of business or purposes to be conducted or promoted in Florida:   |
|      | Operation of coronary scanning facilities  |
|      | William Velle  |
|      | Signature of a member of 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 J. Kelly   |
|      | Typed or printed name of signee  |

## 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:                                   |      |
|--|------|
| Florida Heart - Orlando, LLC   |      |
| 2. The name and the Florida street address of the registered agent and office are: | •    |
| S. Dresden Brunner   | 1    |
| (Name)   | الما |
| 5801 Pelican Bay Blvd., Suite 300  |      |
| Florida street address (P.O. Box NOT ACCEPTABLE)                                   |      |
| Naples FL 34108  | I.   |
| City/State/7 in  | _    |

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.

D. Moder Pourson (Signature)

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

## UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show FLORIDA HEART-ORLANDO, LLC, an Ohio Limited Liability Company, Registration No. 1154486, was organized within the State of Ohio on May 8, 2000 and is currently in FULL FORCE AND EFFECT upon the records of this office.



WITNESS my hand and official se

Columbus, Ohio on

May 22, 2000

J. Kenneth Blackwell
Secretary of State