



# MO1000001449

ACCOUNT NO. : 072100000032

REFERENCE : 197461 4334907

AUTHORIZATION :

COST LIMIT : \$ 125.00

*Patricia Pignatelli*

ORDER DATE : June 22, 2001

ORDER TIME : 3:10 PM

ORDER NO. : 197461-005

000004446770--2

CUSTOMER NO: 4334907

CUSTOMER: Ms. Heather D. Naaktgeboren  
Hca The Healthcare Company  
Po Box 750  
One Park Plaza  
Nashville, TN 37203

FOREIGN FILINGS

NAME: SOUTH DADE GP, LLC

RECEIVED  
01 JUN 26 PM 4:05  
LET. SEC. CT STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson -- EXT# 1155

EXAMINER:

*JB*  
*6-27-01*

APPROVED  
AND  
FILED  
01 JUN 26 AM 9:02  
SECRETARY OF STATE  
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. South Dade GP, LLC  
(Name of foreign limited liability company)
2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 62-1838069  
(FEI number, if applicable)
4. 11/29/2000  
(Date of Organization)
5. 2050  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon date of filing.  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. One Park Plaza, Nashville, Tennessee 37203  
(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:

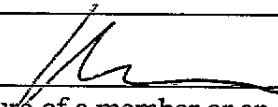
Robert A. Waterman, One Park Plaza, Nashville, Tennessee 37203

01 JUN 26 AM 9:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

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 related  
services

  
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.)

Robert A. Waterman, Manager, President and Secretary

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:

South Dade GP, LLC

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

Corporation Service Company

(Name)

1201 Rays Street

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

Tallahassee

FL

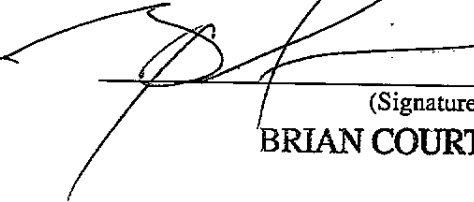
32301

City/State/Zip

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TALLAHASSEE, FLORIDA

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*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, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTH DADE GP, 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 TWENTY-FIFTH DAY OF JUNE, A.D. 2001.

APPROVED  
AND  
FILED

01 JUN 26 AM 9:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1208545

DATE: 06-25-01

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P. 2 NO. 7547

COORP SERVICES CO 2:56PM JUN 28 2001