# N09000000



ACCOUNT NO. : 072100000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$ 155.00

ORDER DATE: April 15, 2002

ORDER TIME : 1:28 PM

ORDER NO. : 529128-010

600005282616--5

CUSTOMER NO: 7275370

CUSTOMER: Ms. Bernadette Bell

Venture General 4901 N.w. 17th Way

Suite 407

Fort Lauderdale, FL 33309

FOREIGN FILINGS

NAME: HIPAA GENERAL LLC

XXXX QUALIFICATION (TYPE: LL)

Name Availability LEASE RETURN THE FOLLOWING AS PROOF OF FILING:

Documen\*X \_ CERTIFIED COPY

----

Examiner

Updater

CONTACT PERSON: Norma Hull -- EXT# 1115 Updater

Verifyer EXAMINER:

Actino latigement DCC

P. Verifyer DCC

W050000000

#### 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.	HIPAA General LLC				
	(Name of foreign limited liability company)				
	Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)				
4.	April 1 2002  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")				
6.	Upon qualification  (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)				
7.	2711 Centerville Road suite 400				
	Wilmington Delaware 19808				
	(Street address of principal office)  If limited liability company is a manager-managed company, check here  The name and wavel business address of principal office)				
9. The name and usual business addresses of the managing members or managers are as follows:					
	4901 NW 17th way suite 407				
	Ft Lauderdale, Florida 33309				
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: Business Consulting  For MEDICAL CAMBULATOR				
	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.)				
	Bernadette Bell				

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.

2. The name and	d the Florida street address	s of the registere	d agent and office are:	02 APR SECRET	
Corporation Service Company					
	(Name)				
				FST	
1201 Hays Street					
Florida street address (P.O. Box NOT ACCEPTABLE)					
	Tallahassee	FL	32301		
(City/State/Zip)					
Having been nam	ned as registered agent and	to accent comic	ea of nuocous for the at-		
liability company	at the place designated in	this certificate.	te of process for the appoin	Statea timitea	
registered agent	and agree to act in this cap	pacity. I further o	agree to comply with the n	rovisions of all	
statutes relating t	to the proper and complete	performance of	my duties, and I am famili	iar with and	
accept the obligat	tions of my position as reg	istered agent as i	provided for in Chapter 60	0.8 F.C	

Brian Courtney Asst. V. Pres.

Filing Fee for Application
Designation of Registered Agent

Certified Copy (optional)

Certificate of Status (optional)

\$ 100.00

\$ 30.00

25.00

5.00

(Signature)

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HIPAA GENERAL 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 FIFTEENTH DAY OF APRIL, A.D. 2002.

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

02 APR 16 PM 3: 03
SECRETARY OF STATE
AND ASSEE, FLORIDA



Darriet Smith Windsor, Secretary of State

AUTHENTICATION: 1722879

DATE: 04-15-02

3510912 8300

020239681