000002726 103 N. MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT:** DATE: **REF. #:** CORP. NAME: () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISS () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAM () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () REINSTATEMENT () MERGER () CERTIFICATE OF CANCELLATION () UCC-1 () OTHER: STATE FEES PREPAID WITH CHECK# 4948 FOR \$ 125.00 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$ PLEASE RETURN: () CERTIFIED COPY () CERTIFICATE OF GOOD STANDING () CERTIFICATE OF STATUS J. BRYAN OCT 1 6 2002 Examiner's Initials

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

Merit Management, LLC		1 1	- ·	Dy 100
(Name of	foreign limited l	iability company)		A Charles
Delaware		51-04228	11	3/40°C
urisdiction under the law of which foreign limited lia company is organized)	3. <u>-</u>		, if applicable)	
(Date of Organization)	5	Perpetual	₹ -	
(Date of Organization)	<u>(Du</u>	ration: Year limited l exist or	ability company v	vill cease to
8-30-02	' 			
(Date first transacted business in Florid	da. (See sections	s 608.501, 608.502, a	and 817.155, F.S.)	
4230 S. MacDill Ave., #203		-	٠ ــ	
Tampa, FL 33611	·	-		
•	address of princ	cipal office)		
			_	
The name and usual business addresses of the Richard J. Pajot, 4230 S. M. Jonathan J. Spees, 1808 Mar	MacDill A	ve., #203,	Tampā, FL	33611
	MacDill A	ve., #203, Santa Moni	Tampā, FL	33611 405
Richard J. Pajot, 4230 S. M Jonathan J. Spees, 1808 Mar	MacDill A	ve., #203, Santa Moni	Tampā, FL	33611 405
Richard J. Pajot, 4230 S. M Jonathan J. Spees, 1808 Mar Merit Health Systems Corpor	macDill A rine St., ration, O ration Ave than 90 days old (A photocopy is	ve., #203, Santa Moni ne North Wa ., #1113, D d, duly authenticated snot acceptable. If the	Tampā, FL ca, CA 90 sher Dr., enver, CO cytheofficial havi	33611 405 #4800 80237 ing custody of rec
Richard J. Pajot, 4230 S. M Jonathan J. Spees, 1808 Mar Merit Health Systems Corpor Chicago, IL 60606 Jay S. Weinstein, 7900 E. U Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized.	ration, O inion Ave chan 90 days ole (A photocopy is	ve., #203, Santa Moni ne North Wa ., #1113, D d, duly authenticated is not acceptable. If the	Tampā, FL ca, CA 90 sher Dr., enver, CO cytheofficial havi	33611 405 #4800 80237 ing custody of rec
Richard J. Pajot, 4230 S. M Jonathan J. Spees, 1808 Mar Merit Health Systems Corpor Chicago, TL 60606 Jay S. Weinstein, 7900 E. U Attached is an original certificate of existence, no more the jurisdiction under the law of which it is organized. Translation of the certificate under oath of the translator	ration, O inion Ave chan 90 days ole (A photocopy is	ve., #203, Santa Moni ne North Wa ., #1113, D d, duly authenticated is not acceptable. If the	Tampā, FL ca, CA 90 sher Dr., enver, CO cytheofficial havi	33611 405 #4800 80237 ing custody of rec
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Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

AMOCO PA 1:22 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 Lia	bility Co	mpany	7 is:		
	Merit Management,	LLC	-	. · · · =	 <u> </u>	

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

Thomas P.	McNamarā		-
	(Name)		•
2909 Bay t	to Bay Bīvd.	, Ste. 309	
Florida street	address (P.O. Box N	OT ACCEPTABLE)	
Tampa	FL .	33629	
	(City/State/Zip)		

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)

\$ 100.00 Filing Fee for Application

Designation of Registered Agent \$ 25.00

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MERIT MANAGEMENT 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 OCTOBER, A.D. 2002.

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





3559123 8300

Warriet Smith Windson Secretary of State

AUTHENTICATION: 2036343

020637417 = DATE: 10-15-02