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2002 DEC 27 PM 1:56  
DIVISION OF CORPORATION  
TALLAHASSEE, FLORIDA

J. BRYAN JAN 10 2003

J. BRYAN JAN 10 2003

CT CORPORATION

January 3, 2003

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

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2003 DEC 27 PM 1:56  
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TALLAHASSEE, FLORIDA

Re: Order #: 5755354 SO  
Customer Reference 1: 43969.106401  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Chapin Revenue Cycle Management LLC (DE)  
Registration  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at  
(850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan  
Manager Fulfill Ctr  
Connie\_Bryan@cch-lis.com

File 2nd

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615



FLORIDA DEPARTMENT OF STATE

Jim Smith  
Secretary of State

January 6, 2003

CT CORPORATION SYSTEM

SUBJECT: CHAPIN REVENUE CYCLE MANAGEMENT, LLC  
Ref. Number: W03000000340

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2002 DEC 27 PM 1:57  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for CHAPIN REVENUE CYCLE MANAGEMENT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 103A00000545

1/9/03

\* Please backdate to:

December 27, 2002

Effective January 1, 2003

Thanks!

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03 JAN -9 PM 2:29  
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. CHAPIN REVENUE CYCLE MANAGEMENT, LLC  
(Name of foreign limited liability company)
2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. \_\_\_\_\_ Applied For  
(FEI number, if applicable)
4. January 1, 2003  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease exist or "perpetual")
6. January 1, 2003  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 4890 W. Kennedy Blvd., Suite 820  
Tampa, FL 33609  
(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:

Keith Henthorne, 4890 W. Kennedy Blvd., Suite 820, Tampa, FL 33609

Katherine Seletos, 4890 W. Kennedy Blvd., Suite 820, Tampa, FL 33609

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: \_\_\_\_\_

Accounts receivable management and collection



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.)

Keith Henthorne

Typed or printed name of signee

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DIVISION OF CORPORATIONS,  
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:

CHAPIN REVENUE CYCLE MANAGEMENT, LLC

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

KEITH HENTHORNE

(Name)

4890 W. Kennedy Blvd., Suite 820

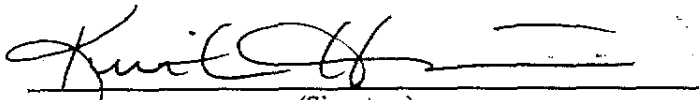
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tampa,

FL 33609

(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
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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TALLAHASSEE, FLORIDA

# Delaware

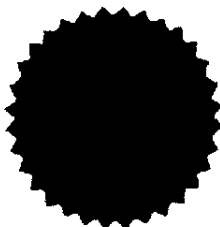
PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHAPIN REVENUE CYCLE 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 SECOND DAY OF JANUARY, A.D. 2003.

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

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



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

3607761 8300

AUTHENTICATION: 2180791

030000283

DATE: 01-02-03