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ACCOUNT NO. : 072100000032

REFERENCE: 183193 4337594

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: February 3, 2005

ORDER TIME : 2:39 PM

ORDER NO. : 183193-005

CUSTOMER NO: 4337594

CUSTOMER: Emily Crosby, Esq.

Paul Hastings Janofsky &

Suite 2400

600 Peachtree Street, N.e.

Atlanta, GA 30308

FOREIGN FILINGS

NAME: GENOA HEALTHCARE CONSULTING,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER:

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 FÓREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Genoa Healthcare Consulting, LLC					
	(Name of Foreign Limited I	Lia	bility Company)			
2	Delaware	3.	80-0113353			
	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)			
4.		5.	perpetual			
	(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")			
6.	August 1, 2004					
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	10210 Highland Manor Drive, Suite 270					
	Tampa, Florida 33610					
	(Street Address	of	Principal Office)			
8.	If limited liability company is a manager-managed	i c	ompany, check here			
9.	The name and usual business addresses of the man	ag	ring members or managers are as follows:			
	Management of the entity is vested in a Board of Managers, which is	omposed of J. Stephen Saton & Alan C. Dahl,				
	(5445 Triangle Parkway, Suite 260, Norcross, GA 30092), Patrick D	lantis (10210 Highland Manor Drive, Suite 250, Tampa, FL 33610)				
	David J. Wenstrup & Tenno M. Tsai (466 Lexington Avenue, New Yo	ork	, NY 10017)			
fly	O. Attached is an original certificate of existence, no more than 90 or e jurisdiction under the law of which it is organized. (A photocop unslation of the certificate under oath of the translator must be subr	уi	s not acceptable. If the certificate is in a foreign language, a	rds ir		
1 :	1. Nature of business or purposes to be conducted or	r p	promoted in Florida:			
	Management consulting services.					
		_				
	Signature of a member or an au	ıth	orized 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 perj	ury	that the facts stated herein are true.)			
	Patrick Duplantis					
	Typed or printed	l n	ame 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 name of the Limited Liability Company is:							
Genoa Healthcare	Consulting, LLC							
2. The name an	nd the Florida street address of	the registered	agent and office are:					
	Corporation Service Company							
(Name)								
	1201 Hays Street							
	Florida Street Address (P.O. Box NOT ACCEPTABLE)							
	Tallahassee	FL	32301					
		City/State/Zip						
liability compan agent and agree relating to the pi	med as registered agent and to a y at the place designated in this to act in this capacity. I further roper and complete performanc y position as registered agent a (Signature)	certificate, I he ragree to comp e of my duties,	ereby accept the appointmently with the provisions of a and I am familiar with and Chapter 608, Florida Sto	ent as registere ll statutes l accept the				

Asst. V. Pres.

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENOA HEALTHCARE CONSULTING, 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 THIRD DAY OF FEBRUARY, A.D. 2005.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENOA HEALTHCARE CONSULTING, LLC" WAS FORMED ON THE TWENTIETH DAY OF MAY, A.D. 2004.



Tarriet Smith Windson, Secretary of State

AUTHENTICATION: 3660774

DATE: 02-03-05

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