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ACCOUNT NO. : 072100000032

REFERENCE : 947198 4802844

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : June 13, 2007

ORDER TIME : 1:11 PM

ORDER NO. : 947198-005

CUSTOMER NO: 4802844

FOREIGN FILINGS

NAME: THE DIX ELLIS GROUP, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds -- EXT# 2933

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

1. The Dix Ellis Group, LLC		
(Name of Foreign Limite	d Lia	ability Company)
2. Delaware	3	26-0270957
(Jurisdiction under the law of which foreign limited liability company is organized)	y .	(FEI number, if applicable)
May 16, 2007	5.	
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
6		
(Date first transacted business in (See sections 608.501 & 608.502 F	Flor .S. t	ida, if prior to registration.) o determine penalty liability)
7. 8381 Dix Ellis Trail, Jacksonville, FL 323	256	j
(Street Addre	SS O	Principal Office)
8. If limited liability company is a manager-manage	ed c	ompany, check here
9. The name and usual business addresses of the ma	anaį	ging members or managers are as follows:
Blue Cross and Blue Shield of Florida, Is	nc.	
4800 Deerwood Campus Parkway, Build	ling	g 100, 7th Floor
Jacksonville, Florida 32246		
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoc translation of the certificate under eath of the translator must be su	ору	
11. Nature of business or purposes to be conducted	or 1	promoted in Florida: Health care services
Don Hano	le	man
Signature of a member or an a	uth	orized representative of a member.
(In accordance with section 608.408(3) an affirmation under the penalties of p	, F.S	, the execution of this document constitutes
Don Hardeman. Presider		, man de man aman mann man man man man man man m

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 Comp	pany is:			
The Dix Ellis Group, LLC				
2. The name and the Florida street address	of the registered agent and office a	ıre:		
Corporation Service Company				
	(Name)			
1201 Hays Street				
Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)			
Tallahassee	FL 32301 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, Florida Statutes.

Corporation Service Company

By:

Jeanine Reynolds

as its agent

\$ 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 "THE DIX ELLIS GROUP, 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 THIRTEENTH DAY OF JUNE, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE DIX ELLIS GROUP, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MAY, A.D. 2007.

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



4353648 8300 070704074 Darriet Smile Hindra

AUTHENTICATION: 5754077

DATE: 06-13-07