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Florida Department of State

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ORIDA/FOREIGN LIMITED LIABILITY CO.

Health Integrity, LLC

Certificate of Status	0
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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:

Health Integrity,	LIC		•
	(Name of Foreign Limits	ed Liability Company)	
Maryland		3, 20-3796994	
	the law of which foreign limited liabilitized)		
November 16, 20	05	5. Perpetual	
(Da	te of Organization)	(Duration: Year limited liability company will exist or "perpetual")	cease to
			ç
	(Date first transacted business in (See sections 608.501 & 608.502 F	Florida, if prior to registration.) F.S. to determine penalty liability)	PRINAL BO
9240 Centreville	oad, Easton, MD 21601		三
	V		7
	(Street Addre	ess of Principal Office)	
Y61:	Her agency 14 a march	and namenany about the	-
II minited like	lity company is a manager-manage	ed company, check here	6: 20
The name and	usual business addresses of the m	anaging members or managers are as follows:	·
Sandra Love, St	. VP 9240 Centreville Road.	Heature 34D 21601	
Smidt's LOVE, BI	VI 9240 Controvine Road,	, Baston, MD 21601	
			
Auscnea is an o tody of records it	ngmai ceruncate of existence, no more the haw of whi	re than 90 days old, duly authenticated by the official ich it is organized. (A photocopy is not acceptable.	al having If the certi
		ate under oath of the translator must be submit	
37		A 1 TH 11 Annualization of a state	
Nature of bus	ness or purposes to be conducted	or promoted in Florida: Investigating and auditin	g or
beneficiary and pro	wider claims for Medicare Part A, B, DA	ME, Home Health, Hospice and Medi-Medi (Medicare/	Medie
	Salal	Sort	
		authorized representative of a member.	
), F.S., the execution of this document constitutes erjury that the facts stated herein are true.)	
	Sandra Love, Senior Vice President	* *	
	Typed or printe	ed name of signee	

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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:	
Health Integrity, L	rc	
2. The name an	d the Florida street address of the registered agent and office are:	90 IVI
	C T Corporation System	SION B JAN
	(Name)	THE SECOND
	1200 South Pine Island Road	DRP OF
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	Ø
	Plantation, Florida 33324	: 28
	City/State/Zip	U ,

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.

By: Clathum A. Waldows, Bant. Security

\$ 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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STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT HEALTH INTEGRITY, LLC IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT . BALTIMORE ON THIS JANUARY 14, 2008.

Paul B. Anderson Charter Division 08 JAN 14 AM 8: 28



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
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