Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

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Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

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Phone Fax Number

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company HealthSouth Sea Pines Holdings, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 2 0 2013

5/17/2013

CR2E027 (9/10)	COVER LETTER
TO: Registration Section Division of Corporation	.
HealthSouth Sea P	nes Holdings, LLC
SUBJECT:	Name of Limited Liability Company
	reign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ed to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence	concerning this matter to the following:
	Name of Person
	Firm/Company
	Address
·	City/State and Zip Code
patrick.stiles@i	•
•	E-mail address: (to be used for future annual report notification)
For further information concerni	ng this matter, please call:
N	of Person Area Code & Daytime Telephone Number
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
MAILING ADDRESS Division of Corporation	
Registration Section	Registration Section
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the	following amount:
☐ \$125.00 Filing Fee	□ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate
_	Certificate of Status Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503. FLORIDA STATLITES. THE FOLLOWING IS STRIMITED TO PROSTER A PROPERTY.

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili Company," "LLC.") 2. Delaware [(Iurisdiction under the law of which foreign limited liability company is organized) 4. December 19, 2011 [(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 502 F.S. to determine penalty liability) 7. 3660 Grandview Parkway, Suite 200, Birmingham, Al 35243 (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: John P. Whittington 3660 Grandview Parkway, Suite 200, Birmingham, Al 35243 Douglas E. Coltharp 3660 Grandview Parkway, Suite 200, Birmingham, Al 35243 10. Attached is an original certificate of existence, no more than 90 days old, duly sutherificated by the official having custody off the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fureign language, a translation of the cardificate under cash of the translation to the cardificate under cash of the translation rounds the submitted.) Signature of a member or an authorized fepresentative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the	1. HealthSouth Sea Pines Holdings, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")					
(Gurisdiction under the law of which foreign limited liability (FEI number, if applicable) (December 19, 2011	consent of	the managers or managing members adopting the alternate name. The alternate name must include "Limited				
4. December 19, 2011 (Date of Organization) 5. perpetual (Duration: Year limited liability company will cease to exist or "perpetual") 6. July 1, 2012 (Date first transacted business in Florida, if prior to registration.) (See section 608.501 & 608.502 F.S. to determine penalty liability) 7. 3660 Grandview Parkway, Suite 200, Birmingham, Al 35243 (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: John P. Whittington 3660 Grandview Parkway, Suite 200, Birmingham, Al 35243 Douglas E. Coltharp 3660 Grandview Parkway, Suite 200, Birmingham, Al 35243 10. Attached is an original certificate of existence, no more than 90 days old, duly authernicated by the official having outstody off 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 each of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Signature of a member or an authorized Fepresentative of a member. (In accordance with section 608,408,3) F.S., the execution of this document constitutes an affirmation under the	<i>t</i>	•				
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penalties of perjury that the facts stated have in one tree. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817,155, F.S.)		(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. I am aware that any false information submitted in	2			

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 Company is:				
HealthSouth Sea Pines Holdings, LLC				
If unavailable, the alternate to be used in the state of Florida is:				
2. The name and	d the Florida stre	et address of the registered agent and office are:	•	
		C T Corporation System		
	(Namo)			
		1200 South Pinc Island Road		
Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL 33324		
		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.

C T Corporati	on System	Connie Bryan
By: Carrie	(Signal	ne) Paciatant Corretain
	(0.8)	
S	100.00	Filing Fee for Application
\$	25.00	Designation of Registered Agent
\$	30.00	Certified Copy (optional)
S	5.00	Certificate of Status (optional)

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 17 AM 7: 29

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTHSOUTH SEA PINES HOLDINGS, 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 SEVENTEENTH DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5082268 8300

130603132

You may verify this certificate online at corp. delaware.gov/authver.shtml

AUTHENTY CATION: 0441588

DATE: 05-17-13