

ACCOUNT NO. : 072100000032

REFERENCE: 270177 5012441

AUTHORIZATION :

COST LIMIT : \$ 52.50

140.00 ORDER DATE: February 24, 1997

ORDER TIME : 11:05 AM

ORDER NO. : 270177-010

CUSTOMER NO: 5012441

CUSTOMER: Ms. Melinda Lampkin

Columbia/hca Healthcare 200002098852--1

1 Park Plaza

P.o. Box 550

Nashville, TN 37202-0550

FOREIGN FILINGS

NAME:

COLUMBIA LAKE CITY MANAGEMENT.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Daniel W Leggett

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION

TO TRANSACT BUSINESS IN FLORIDA

1. COLUMBIA LAKE CITY MANAGEMENT, LLC (Name of Foreign limited liability company must end with the words "limited company" or their abbreviation"L.C." if not so contained in the name at present.) 2. 3. Delaware Applied for (Jurisdiction under the law of which foreign (FEI number, if applicable) limited liability company is organized.) 4. 2/20/97 5. <u>Perpetual</u> (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 6. **Upon Filing** (Date first transacted business in Florida. (See Sections 808.501, 808.502, and 817.155, F.S.) 7. One Park Plaza, Nashville, TN 37203 (Street Address of Principal office) 8. Name(s) and business address(es) of managing member(s) or manager(s) who will manage the foreign limited liability company in Florida: (attach additional page if necessary) Notami Hospitalsof Florida, Inc.

FILING FEE: \$52.50 for Application

One Park Plaza, Nashville, TN 37203

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of Columbia Lake City Management, LLC, a Delaware limited liability company, deposes and says:

- 1) As permitted under Delaware law, the above named limited liability company has one (1) member.
- 2) The total amount of cash contributed by the member is \$1000.00.
- 3) No property other than cash was contributed by the member.
- 4) The total amount of cash or property anticipated to be contributed by the member \$\frac{1}{2}\$ \$1000.00. This total includes amounts from 2 and 3 above.

SUBSCRIBED AND SWORN TO this 21st day of February, 1997.

Notami Hospitals of Florida, Inc.

Bv:

John M. Franck II

_Secretary

Notary Public in and for the State of Tennessee

My Commission Expires: 1/24/98

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, ORGANIZED UNDER THE LAWS OF THE STATE OF DELAWARE, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

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.

(Signature) Deborah D. Skipper, As Agent (Date)

Filing Fee: \$35 for Designation of Registered Agent

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "COLUMBIA LAKE CITY 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 TWENTY-FIFTH DAY OF FEBRUARY, A.D.

1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HONOT BEEN ASSESSED TO DATE.



Edward J. Freel, Secretary of State 8345345

AUTHENTICATION:

02-25-97

DATE:

2720489 8300 971061052