FILED Feb 19, 2008 8:00 am Secretary of State

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1. Entity Name BAPTIST HEALTH SOUTH FLORIDA, INC.						02	:-19-2008 9	90027 024	l ****61.	25		
Principal Place of Business 6855 RED ROAD SUITE 600 CORAL GABLES, FL 33143-3632 Mailing Address 6855 RED ROAD SUITE 600 CORAL GABLES, FL 33143-3632 CORAL GABLES, FL 33143-3632					532	,	 		II BIBIN BIBIN BIBIN	I FIFA BIEN BIE	(i) F i	
2. Principal P	Place of Busin	ness - No P.O. Box#	3. Mailing Address									
Suite, Apt.	#, etc.	·-	Suite, Apt. #, etc.				01232008 Ci	ng-NP	CR2E03	7 (12/06)	- -	
City & State			City & State			4. FEI Number 65-026766	8			plied For t Applicable		
Zip Country			Zip	Zip Country			S. Certificate of Status Desired					
	6. Name	and Address of Current	Registered Agent				7. Name and Add	ress of New F	Registered A	gent		
FRIEDMA	N DAVID	P			Name			•				
6855 RED CORAL G	ROAD			Street Address			(P.O. Box Number is Not Acceptable)					
	·				C .					1 7 0 1		
					City		Í		FL	Zip Code	;	
8. The above the obligat	named entity tions of regist	y submits this statement fo tered agent.	r the purpose of changin	j its register	red office or	register	ed agent, or both, in	the State of FI	orida. I am fa	amiliar with,	and accept	
SIGNATURE	Signature, typed	or printed name of registered agent	and title if applicable.	NOTE: Registere	ed Agent signatur	re required	when reinstating)		DATE			
-		e is \$61.25		Campaign I		п	\$5.00 May Be	N.	<i>l</i> lake check		•	
-		flay 1, 2008	Trust Fu	nd Contribu	tion. (Added to Fees	fio	flake check rida Depart	payable to ment of St	ate	
10.	Due by N		Trust Fu	nd Contribu	tion. (\$5.00 May Be Added to Fees	fio	flake check rida Depart	payable to ment of St ECTORS IN	ate	
TITLE	AS	OFFICERS AND DIF	Trust Fu	nd Contribu	tion. (Added to Fees	fio	flake check rida Depart	payable to ment of St	ate	
	AS HARTH, C	flay 1, 2008	Trust Fu	nd Contribute 11.	tion. (Added to Fees	fio	flake check rida Depart	payable to ment of St ECTORS IN	ate	
TITLE NAME	AS HARTH, C 8563 ARD	Aay 1, 2008 OFFICERS AND DIF	Trust Fu	nd Contribute 11. TITE NAA STR	tion. (Added to Fees	fio	flake check rida Depart	payable to ment of St ECTORS IN	ate	
TITLE NAME STREET ADDRESS	AS HARTH, C 8563 ARD MIAMI LA AS	OFFICERS AND DIF GEORGE P OOCK ROAD LKES, FL 33016	Trust Fu	nd Contribute 11. TITE NAA STR	E.E.ME.EET ADDRESS Y-ST-ZIP		Added to Fees	fio	flake check rida Depart	payable to ment of St ECTORS IN	ate	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	AS HARTH, C 8563 ARC MIAMI LA AS MCCABE	OFFICERS AND DIF GEORGE P DOCK ROAD LKES, FL 33016	Trust Fu	nd Contribu	E.E. ALE ADDRESS Y-ST-ZIP LE ALE ADDRESS ALE		Added to Fees	fio	flake check rida Depart	payable to ment of St ECTORS IN	ate 10 Addition	
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