

# N/96000003107

Allen Palmer / Parker-Hudson  
Requestor's Name

118 W. Greisdan St.  
Address

1666 Pa. 37308 601-0151  
City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- 1 North Central Florida Health Partners, Inc.  
(Corporation Name) (Document #)
- 2 \_\_\_\_\_  
(Corporation Name) (Document #)
- 3 \_\_\_\_\_  
(Corporation Name) (Document #)
- 4 \_\_\_\_\_  
(Corporation Name) (Document #)

- ☒ Walk in
 ☐ Mail out
 ☐ Pick up time \_\_\_\_\_
 ☐ Will wait
 ☐ Photocopy
- ☒ Certified Copy
 ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R A, Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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*Per phone call  
with Jennifer Crane  
(current director's name)  
11/16*



Examiner's Initials	
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SENT BY: PARKER, HUDSON

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FLORIDA DEPARTMENT OF STATE  
Sandra E. Mortham  
Secretary of State

May 20, 1998

PARKER, HUDSON, RAINER & DOBBS  
THE PERKING HOUSE  
118 NORTH GADSDEN STREET  
TALLAHASSEE, FL 32301

The name NORTH CENTRAL FLORIDA HEALTH PARTNERS, INC. has been reserved for 120 days beginning May 20, 1998. The reservation number is R9600002566 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lanham Act); Chapter 485, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.08, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section.

Ruth Leonard

Letter number: 596A00024889

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATION  
OF  
NORTH CENTRAL FLORIDA HEALTH PARTNERS, INC.

1.

The name of the Corporation shall be North Central Florida Health Partners, Inc.

2.

The Corporation shall be a not for profit corporation organized pursuant to the provisions of the Florida Not For Profit Corporation Act.

3.

The Corporation shall have perpetual duration.

4.

The Corporation shall be operated for such purposes as may be permitted to not for profit corporations that are organized under the Florida Not For Profit Corporation Act, including, without limitation, the establishment, operation and maintenance of a collaborative network of physician hospital organizations to improve the quality, availability and cost effectiveness of healthcare services to the residents of Central Florida including, without limitation, Citrus, Marion, Sumter and northern Lake Counties. The Corporation may engage in any and all lawful activities incidental to the foregoing purpose. The Corporation shall have all of the powers conferred upon not for profit corporations under the Florida Not For Profit Corporation Act.

5.

The Corporation shall have no capital stock.

6.

The Corporation shall have members ("Members") who shall have such rights as may be set forth in the Corporation's Bylaws, as adopted by its Board of Directors. The initial Members of the Corporation shall be Citrus Memorial Health Foundation, Inc. and Munroe Regional Medical Center Physician-Hospital Organization, Inc. Admission of additional Members shall be according to criteria established by the Board of Directors of the Corporation pursuant to the Bylaws of the Corporation.

7.

Management and control of the Corporation shall be vested in a Board of Directors. The number and the method of election of the members of the Board of Directors as well as any qualifications for

being a member of the Board of Directors shall be as provided from time to time in the Bylaws of the Corporation, except that the number of the members of the initial Board of Directors is fixed by Article 8 of these Articles of Incorporation.

8.

The initial Board of Directors of the Corporation shall consist of eight (8) members, whose names and addresses are set forth below. Each member of the initial Board of Directors shall serve as a Director until the initial meeting of the Members is held and the Directors are duly elected in the manner set forth in the Bylaws of the Corporation.

<u>Name</u>	<u>Address</u>
Dwight Bruining	502 Highland Boulevard Inverness, Florida 34452
Joseph Dorn, M.D.	502 Highland Boulevard Inverness, Florida 34452
Emery Hensley	502 Highland Boulevard Inverness, Florida 34452
Michael La Marche, D.O.	502 Highland Boulevard Inverness, Florida 34452
<del>Todd Overcash</del> <del>Douglas Hall, M.D.</del>	131 S.W. 15th Street Ocala, Florida 34474
Dante Raju, M.D.	131 S.W. 15th Street Ocala, Florida 34474
Dyer Michell	131 S.W. 15th Street Ocala, Florida 34474
Richard Mutarelli	131 S.W. 15th Street Ocala, Florida 34474

9.

The street address of the Corporation's initial registered office is 118 North Gadsden Street, Suite 200, Tallahassee, Florida 32301, and the initial registered agent of the Corporation at that office is Karen A. Putnal, Esq.

10.

The mailing address of the initial principal office of the Corporation is 131 S.W. 15th Street, Ocala, Florida 34474, Attention: Dyer Michell.

11.

The name and address of the incorporator is Karen A. Putnal, Esq., 118 North Gadsden Street, Suite 200, Tallahassee, Florida 32301.

12.

The Articles of Incorporation of the Corporation may be amended at any time in the manner provided in the Florida Not For Profit Corporation Act (or the corresponding provision of any future Florida not for profit corporation law) by the approving vote of the Board of Directors and confirmed by the approving vote of the Members, with such votes being in accordance with the voting requirements for Board and Member action, respectively, as set forth in the Bylaws of the Corporation.

IN WITNESS WHEREOF, the incorporator has executed these Articles of Incorporation, this 11th day of June, 1996.

  
Karen A. Putnal, Incorporator

Address: 118 North Gadsden Street  
Suite 200  
Tallahassee, Florida 32301

dgc\citrus\artofinc.5

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

North Central Florida Health Partners, Inc.  
(must include suffix)

2. The name and address of the registered agent and office is:

Karen A. Putnal, Esq.

(NAME)

118 N. Gadsden Street, Suite 200

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee, Florida 32301

(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated corporation 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.*

Karen A. Putnal  
(SIGNATURE)

6-11-96

(DATE)