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Florida Department of State
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To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5926

FLORIDA PROFIT CORPORATION OR P.A.

Jacksonville Market, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$78.75

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MRD 12/13

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Jacksonville Market, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ $70.00 Filing Fee

☐ $78.75 Filing Fee & Certificate of Status

☒ $78.75 Filing Fee & Certified Copy

☐ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Dora A. Blackwood
Name (Printed or typed)

One Park Plaza
Address

Nashville, TN 37203
City, State & Zip

(615) 344-2162
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Jacksonville Market, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

One Park Plaza, Nashville, TN 37203

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

healthcare related business

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Dora A. Blackwood - One Park Plaza, Nashville, TN 37203

****

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Connie Bryan CONNIE BRYAN SPECIAL ASSISTANT SECRETARY — 12/12/2005
Signature/Registered Agent — Date

Dora A. Blackwood — 12/09/2005
Signature/Incorporator — Date
Dora A. Blackwood