Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

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

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11 JUL 15 PM 3:03
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION
FLORIDA REGIONAL MEDICAL CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$70.00

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2011 JUL 15 PM 2:30
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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: *Florida Regional Medical Center, 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: Donna Jarrell
Name (Printed or typed)

1445 Ross Avenue, Suite 1400
Address

Dallas, Texas 75202
City, State & Zip

(469) 893-2701
Daytime Telephone number

donna.jarrell@tenethealth.com
E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE, FLORIDA

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: Florida Regional Medical Center, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1445 Ross Avenue
Suite 1400
Dallas, Texas 75202

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

Health Care

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kristina A. Mack, Sole Director
Address: 1445 Ross Avenue, Suite 1400, Dallas, Texas 75202

Name and Title: Tyler Murphy, Treasurer
Address: 1445 Ross Avenue, Suite 1400, Dallas, TX 75202

Name and Title: Marsha Powers, President
Address: 1445 Ross Avenue, Suite 1400, Dallas, Texas 75202

Name and Title:
Address:

Name and Title: Kristina A. Mack, Secretary
Address: 1445 Ross Avenue, Suite 1400, Dallas, Texas 75202

Name and Title:
Address:

2011 JUL 15 PM 2:30

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: C T Corporation System
Address: 1200 South Pine Island Road, Plantation, Florida 33324

ARTICLE VII INCORPORATOR
The name and address of the incorporator is:
Name: Kristina A. Mack, Secretary
Address: 1445 Ross Avenue, Suite 1400, Dallas, Texas 75202

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

By: C T Corporation System — Kimberly Baggett, Assistant Secretary — 7/15/11
Required Signature/Registered Agent — Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Kristina A. Mack — July 14, 2011
Required Signature/Incorporator — Date

Kristina A. Mack, Secretary