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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 014785 7509084 AUTHORIZATION : C COST LIMIT : \$ 70.00 ORDER DATE: September 17, 2021 ORDER TIME : 5:0 PM ORDER NO. : 014785-005 CUSTOMER NO: 7509084 DOMESTIC FILING NAME: PERINATAL CENTER OF SOUTH FLORIDA, INC. EFFECTIVE DATE: XX __ ARTICLES OF INCORPORATION ____ CERTIFICATE OF LIMITED PARTNERSHIP ___ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

1201 Hays Street

ARTICLES OF INCORPORATION

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

<u>FICLE II PRI</u> Burton Hills Bou shville, TN 3721	NCIPAL OFFICE Principal street address plevard principal street address		Mailing address, if different is:
		business.	
			2021 S
TCLE IV SHA number of shares	IRES of stock is: 1,000 common at \$0.01 par val	ue	[P 20 P
ICLE V INIT	<u> </u>		3. 10 Vs.
ICLE V INIT	itle: Doug Smith, M.D Director & Pres 1A Burton Hills Boulevard	_ Name and Title _ Address:	Henry Howe - CFO & Exec VP
Name and T	itle: Doug Smith, M.D Director & Pres 1A Burton Hills Boulevard Nashville, TN 37215	_ Name and Title	Henry Howe - CFO & Exec VP 1A Burton Hills Boulevard Nashville, TN 37215

Name an	nd Title: Matthew Musso - VP	Name and Title:
Address	1A Burton Hills Boulevard	Address:
	Nashville, TN 37215	
40TICLE 1/1	DECISTERED ACTOR	
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptal	ole) of the registered agent is:
Name:	Corporation Service Company	
Address:	1201 Hays Street	
	Tallahassee, FL 32301	
APTICLE VII	INCORPORATOR	
	ddress of the Incorporator is:	
The mante and a	· ·	
Name:	Justin Page ————————————————————————————————————	
Address:	1A Burton Hills Boulevard	
	Nashville, TN 37215	
ARTICLE VIII	EFFECTIVE DATE: Lines Filing	
Effective date, if	other than the date of filing:	(OPTIONAL)
If an effective of iling.)	late is listed, the date must be specific and	cannot be more than five days prior or 90 days after the
		cable statutory filing requirements, this date will not be listed as
he document's e	ffective date on the Department of State's rec	ords.
Having been nan certificate, I am f	ned as registered agent to accept service of pro familiar with and accept the appointment as re	cess for the above stated corporation at the place designated in this gistered agent and agree to act in this capacity
	Eylina Bahor	09/20/2021
· -	Assistant Vice President Required Signature/Registered Agen	t Date
submit this doc locument to the i	cument and affirm that the facts stated herei. Department of State constitutes a third degree	n are true. I am aware that the false information submitted in a felony as provided for in s.817.155, F.S.
Justin Page		9/17/2021
	re/Incorporator	Date