

CT CORPORATION SYSTEM

# FOI 0000001719

CORPORATION(S) NAME

OccMed Holding Corporation

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100003929461--5  
03/29/01 81970-012  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

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|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Foreign  | <input type="checkbox"/> Reinstatement          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Change of RA       |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Photocopies         | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> Call If Problem    |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

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FILED  
01 MAR 29 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR 29 11:16  
UNIVERSITY MICROFILMS  
TALLAHASSEE, FLORIDA

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

3/29/01

Order#: 3889458

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

*hpc*  
*3/29*  
*e*

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED  
MAR 29 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

- 1. OccMed Holding Corporation  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
- 2. Delaware 3. Applied For  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
- 4. 03/20/2001 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
- 6. 04/01/2001  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

- 7. One HealthSouth Parkway, Birmingham, AL 35243  
(Principal office address)
- same  
(Current mailing address)

- 8. To manage the business operations of occupational health facilities  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

- 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip code)

10. Registered agent's acceptance:  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

By: C T Corporation System  
Dale W. Morris  
(Registered agent's signature) **DALE W. MORRIS**  
ASSISTANT VICE PRESIDENT

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

SEE ATTACHMENT

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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01 MAR 28 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

B. OFFICERS

President: William T. Owens

Address: One HealthSouth Parkway

Birmingham, AL 35243

Vice President: William W. Horton

Address: One HealthSouth Parkway

Birmingham, AL 35243

Secretary: William W. Horton

Address: One HealthSouth Parkway Birmingham, AL 35243

Treasurer: Richard E. Botts

Address: One HealthSouth Parkway Birmingham, AL 35243

SEE ATTACHMENT

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. W. T. Owens

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William T. Owens, President

(Typed or printed name and capacity of person signing application)

Attachment to Florida  
Application By Foreign Corporation for Authorization to Transact Business In Florida

**Officers & Directors**

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01 MAR 29 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Full Name: William T. Owens  
Officer/Director: Officer, Director  
Officer's Title: President  
Business Address: One HealthSouth Parkway  
City: Birmingham  
State: AL  
ZIP Code: 35243
  
2. Full Name: William W. Horton  
Officer/Director: Officer, Director  
Officer's Title: Vice President and Secretary  
Business Address: One HealthSouth Parkway  
City: Birmingham  
State: AL  
ZIP Code: 35243
  
3. Full Name: Richard E. Botts  
Officer/Director: Officer, Director  
Officer's Title: Vice President and Treasurer  
Business Address: One HealthSouth Parkway  
City: Birmingham  
State: AL  
ZIP Code: 35243

State of Delaware  
Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OCCMED HOLDING CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MARCH, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED  
01 MAR 29 PM 1:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3370731 8300

AUTHENTICATION: 1044098

010146395

DATE: 03-26-01