

F010000004343

ACCOUNT NUMBER: FCA000000005

REFERENCE: 402 6327-1
(Sub Account)

DATE: 8-16

REQUESTOR NAME: Lexis Document Services

ADDRESS:

TELEPHONE: () () ext ()

CONTACT NAME:

CORPORATION NAME: Amicore, Inc.

DOCUMENT NUMBER:
(if applicable)

AUTHORIZATION:

C. Woodyard
Cynthia J. Woodyard

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-9)
- PLAIN STAMPED COPY

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- Call When Ready
- Walk In
- Mail Out
- Call if Problem
- Will Wait
- After 4:30
- Pick Up

BK

BK

FILED
01 AUG 16 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 AUG 16 AM 10:38
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN 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. Amicore, Inc. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of natural person or partnership if not so contained in the name at present.)
2. Delaware (State or country under the law of which it is incorporated)
3. 52-2333629 (FEI number, if applicable)
4. February 1, 2001 (Date of incorporation)
5. Perpetual (Duration: Year corp. will cease to exist or "perpetual")
6. Upon Filing (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.)

FILED 01 AUG 18 11 18 AM '18 SECRETARY OF STATE TALLAHASSEE, FLORIDA

- 7. 675 Third Avenue New York, NY 10017 (Principal office address)
675 Third Avenue New York, NY 10017 (Current mailing address)

8. Electronic medical record software and consulting services. (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: Lexis Document Services Inc.

Office Address: 3953 W.W. Kelley Road

Tallahassee, Florida 32311 (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.

Lexis Document Services Inc. (Registered agent's signature)

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

Chairman: Steve Pacicco

Address: 235 East 42nd Street

New York, NY 10017

Vice Chairman: Douglas Giordano

Address: 235 East 42nd Street

New York, NY 10017

Director: Arnold I. Friede

Address: 235 East 42nd Street

New York, NY 10017

Director: _____

Address: _____

B. OFFICERS

President: Steve Pacicco

Address: 235 East 42nd Street

new York, NY 10017

Vice President: Douglas Giordano

Address: 235 East 42nd Street

New York, NY 10017

Secretary: Arnold I. Friede

Address: 235 East 42nd Street New York, NY 10017

Treasurer: Nancy Knowles

Address: 235 East 42nd Street New York, NY 10017

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

13. Arnold I. Friede
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Arnold I. Friede
(Typed or printed name and capacity of person signing application)

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01 AUG 16 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of Delaware
Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMICORE, INC." 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 FOURTEENTH DAY OF AUGUST, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMICORE, INC." WAS INCORPORATED ON THE FIRST DAY OF FEBRUARY, 2001.

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

FILED
MAY 16 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3351331 8300

AUTHENTICATION: 1295018

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DATE: 08-14-01