F0200001

ACCOUNT NO.

072100000032

REFERENCE :

484531

AUTHORIZATION

COST LIMIT

ORDER DATE : March 20, 2002

ORDER TIME : 11:03 AM

ORDER NO. : 484531-005

CUSTOMER NO: 7225868

CUSTOMER: Ms. Kathleen A. Ellison

Mintz, Levin, Cohn, Ferris,

157 Church Street

20th Floor

New Haven, CT 06510

FOREIGN FILINGS

NAME:

KELSON BILLING SERVICES OF

FLORIDA, INC.

XXXX QUALIFICATION

(TYPE: CO)

700005139037--8

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY · PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA** IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SE REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORE 1. Kelson Billing Services of Florida, Inc. (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 (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. December 17, 2001 (Date of incorporation) (Duration: Year corp. will cease to existor "perpetual") 6. Upon Qualification (Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 90 State House Square, 10th Floor, Hartford, CT 06103 (Current mailing address) 8. Any lawful act/activity for which corp. may be organized in Delaware and/or Florida (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) Corporation Service Company Office Address: ____ 1201 Hays Street Tallahassee, FL , Florida, 32301 (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. Muse

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.

(Registered agent's signature) Louise B. Smith, Assistant Secretary

Chairman:	
ddress:	20 8
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ice Chairman:	7 2 C CA
ddress:	
irector: Lawrence Kries	
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irector: Jeffrey Kinell	
ddress: 90 State House Square, 10th Floor Hartford, CT 06103	
. OFFICERS (Street address only - P.O. Box NOT acceptable)	<u> </u>
esident: Lawrence Kries	
ddress: 90 State House Square, 10th Floor, Hartford, CT 06103	· · ·
ice President: Jeffrey Kinell	
ddress: 90 State House Square, 10th Floor Hartford, CT 06103	
cretary: Jeffrey Kinell	
ddress: 90 State House Square, 10th Floor, Hartford, CT 06103	
easurer: Paul A. Hughes (Asst. Secretary)	
ddress: Mintz, Levin, 157 Church Street, 20th Floor, New Haven, CT 06510	
OTE: If necessary, you may attach an addendum to the application listing addit	
(Signature of Chairman, Vice Chairman, or any officer listed in r	number 12 of the application)
Paul A. Hughes, Treasurer and Asst. Secretary	

<u>Delaware</u>

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF T DELAWARE, DO HEREBY CERTIFY "KELSON BILLING SERVICES OF ELC INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATI EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MARCH, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KELSON BILLING SERVICES OF FLORIDA, INC." WAS INCORPORATED ON THE SEVENTEENTH DAY OF DECEMBER, A.D. 2001.



Harrlet Smith Windsor, Secretary of State

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AUTHENTICATION: 1676897

DATE: 03-20-02