F00000002524

CSC THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 683656 7212590

AUTHORIZATION :

COST LIMIT : $ PREPAID

ORDER DATE : May 2, 2000

ORDER TIME : 10:37 AM

ORDER NO. : 683656-005

CUSTOMER NO: 7212590

800003240338--0
-05/05/00--01024--011
*****78.75 *****78.75

CUSTOMER: Mr. John O'malia
Valence Health, Inc.
208 S. Lasalle Street
Suite 1154
Chicago, IL 60604

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -5 AM 10:01

RECEIVED
00 MAY -5 AM 11:43
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: VALENCE HEALTH, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward

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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -5 AM 10:01

1. VALENCE HEALTH 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)

3. 36-4265323
(FEI number, if applicable)

4. MARCH 22, 1996
(Date of incorporation)

5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")

6. ANTICIPATED DATE IS MAY 11, 2000
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 208 S. LASALLE STREET, SUITE 1154
CHICAGO, IL 60604
(Current mailing address)

8. PROVIDE OPERATIONAL AND FINANCIAL MANAGEMENT SERVICES TO HEALTH CARE INC.
(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: CORPORATION SERVICE COMPANY

Office Address: 1201 HAYS STREET

TALLAHASSEE, 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.

CORPORATION SERVICE COMPANY
BY: [signature]
(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 addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

~~Vice Chairman~~ DIRECTOR: PHILIP H. KAMP

Address: 1767L NORTH HOYNE
CHICAGO, IL 60647

Director: REXFORD CATTANACH

Address: 9855 53RD ST., N.
LAKE ELMO, MN 55042

Director: R. TODD STOCKARD

Address: 1629 N. WOOD
CHICAGO, IL 60622

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -5 AM 10:01

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: PHILIP H. KAMP

Address: AS NOTED ABOVE

Vice President: _____

Address: _____

Secretary: REXFORD CATTANACH

Address: AS NOTED ABOVE

Treasurer: R. TODD STOCKARD

Address: AS NOTED ABOVE

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

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

14. Phil Kamp, PRESIDENT
(Typed or printed name and capacity of person signing application)

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -5 AM 10:01

SUBJECT: VALENCE HEALTH INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOHN O'MALIA
(Name of Person)

VALENCE HEALTH, INC.
(Firm/Company)

208 S. LA SALLE STREET, SUITE 1154
(Address)

CHICAGO, IL 60604
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

JOHN O'MALIA at (312) 422-6327
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ $70.00 Filing Fee

☒ $78.75 Filing Fee & Certificate of Status

☐ $78.75 Filing Fee & Certified Copy

☐ $87.50 Filing Fee, Certificate of Status & Certified Copy

State of Delaware

Office of the Secretary of State

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 MAY -5 AM 10:01

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VALENCE HEALTH, 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 FOURTH DAY OF MAY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VALENCE HEALTH, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF MARCH, A.D. 1996.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Edward J. Freel, Secretary of State

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AUTHENTICATION: 0419265

DATE: 05-04-00