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Division of Corporations
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Katherine Harris. Secretary of State

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To:

Division of Corporations

Adm sinupat

: (850) 927-4003

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number: 075350000353
Phone: (212)431-5000

Fax Number : (212)431-1441

SECRETARY OF STATE

FOREIGN PROFIT QUALIFICATION

MEDSCAPE PORTALS, INC.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITT. PREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.	ED TO
REGISTER A FO	REIGH CORPORATION TO TRANSACT BUSINESS IN THE STATE OF TECHEDA.	e NA
I. MEDS	CAPE PORTALS, INC.	<u> </u>
words or abbrev	ration; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or ristions of like import in language as will clearly indicate that it is a corporation instead of a partnership if not so contained in the name at present.)	DEC 28
2DELAWA	RE 3 APPLIED FOR	PH 5:
(State or country	under the law of which it is incorporated) (FEI number, if applicable)	S. A.
4 12/22/00	5. PERPEUTAL	
(Dat	c of incorporation) (Duration: Year corp. will cease to existor "perpetua	.!")
6 <u>UPC</u>	ON FILING OF THIS APPLICATION	- · · - · · · · · · · · · · · · · · · ·
(Date first	t transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)	
7	20500 NW EVERGREEN PARKWAY, HILLSBORG, OR 97124	
	(Current mailing address)	
(Purpose) 9. Name and str	CNLINE MEDICAL .INFORMATION AND INTERACTIVE PROGRAMS TO HEALTHCARE (s) of corporation authorized in home state or country to be carried out in state of Florida) reet address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptate BLUMBERGEXCELSION CORPORATE SERVICES, INC.	CONSUMERS
Office Address:	4435 OLD WINTER GARDEN ROAD	
	ORLANDO Florida, 328111 (Zip code)	
io. Registered	agent's acceptance:	
this application, I with the provision the obligations of	ed as registered agent and to accept service of process for the above stated corporation at the phereby accept the appointment as registered agent and agree to act in this capacity. I further sof all statutes relative to the proper and complete performance of my duties, and I am familially position as registered agent. Registered agent's signature) Jose Mogica A. Assi	agree to comply ar with and accept
11. Attached is a did Department of State which it is incorporated at the component of the	certificate of existence duly authenticated, not more than 90 days prior to delivery of this applica- te, by the Secretary of State or other official having custody of corporate records in the jurisdictionated.	tion to the on under the law of

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Address: Vice Chairman: Address: Director: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 10001 Director: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORD, OR 97124 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORD, OR 97124 Vice President: Address: 20500 NW EVERGREEN PARKWAY, HILLSBORD, OR 97124 Vice President: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 10001	Chairman:			
Vice Chairman: Address: MARK BOULDING Address: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORD, OR 97124 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORD, OR 97124 Wice President: Address: 20500 NW EVERGREEN PARKWAY, HILLSBORD, OR 97124 Wice President: Address: MARK BOULDING Address: MARK BOULDING Address: MARK BOULDING Address: (Signably British of Charman, or any effect listed in number 12 of the application)				,
Address: DAYID MOFFENBRIER Common Common	_		· · · · · · · · · · · · · · · · · · ·	
Address: DAYID MOFFENBRIER Common Common	Vice Chair	man:		
Address: 224 W. 30TH ST., NEW YORK, NY 10001 Director: DAYID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORG, OR 97124 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORG, OR 97124 Vice President: Address: 40500 NW EVERGREEN PARKWAY, HILLSBORG, OR 97124 Vice President: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 10001 Trensurer: Address: (Signature of Casternam, or any effect listed in number 12 of the application)				
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Director: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILL SHORO, OR 97124 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILL SHORO, OR 97124 Vice President: Address: Secretary: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 10001 Treasurer: Address: NOTE: If necessary, you may affect as addendating to the application listing additional officers and/or directors. 13. Address: (Signature of Capternam, or any officer listed to number 12 of the application)	_		00	SEC 378
Address: 20500 NW EVERGREEN PARKWAY, HILLSBORO, OR 97124 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: DAVID MOFFENBEIER Address: 20500 NW EVERGREEN PARKWAY, HILLSBORO, OR 97124 Vice President: Address: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 10001 Treasurer: Address: 15 Address: 16 Address: 17 Address: 18 Ad	Director: _	DAVID MOFFENBEIER		74 25-
B. OFFICERS (Street address only - P.O. Box NOT acceptable) President:	Address: _	20500 NW EVERGREEN PARKWAY, HILLSBORO, OR 97124	_	9-4
President:	B OFFI	TERS (Street address only P.O. Ber NOT		
Address: 20500 NW EVERGREEN PARKWAY, HILL SHORO, OR 97124 Vice President: Address: MARK BOULDING				TIONS
Vice President: Address: Secretary: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 10001 Treasurer: Address: NOTE: If necessary, you may altach as addandam to the application listing additional officers and/or directors. 13.				<u>ဟ</u>
Secretary: MARK BOULDING Address: 224 W. 30TH ST., NEW YORK, NY 19001 Treasurer: Address: NOTE if necessary, you may altach as addendum to the application listing additional officers and/or directors. 13. Sures Secretary, You may altach as addendum to the application listing additional officers and/or directors. (Signature of Chalterian, Yiee Chalterian, or any officer listed in number 12 of the application)	- Vice Presid			···
Address: 224 W. 30TH ST., NEW YORK, NY 19001 Treasurer: Address: NOTE: If necessary, you may altach as addendum to the application liming additional officers and/or directors. 13.	Address: _		· · · · · · · · · · · · · · · · · · ·	1 1/2/1/2007
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13. Signature of Charleman, Vice Charleman, or any officer listed in number 12 of the application)				
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(Signature of Chairman, Vice Chairman, of any officer listed in number 12 of the application)	- • - •	Et il necessary, you may attach as addendum to the application living additional officers and/or directors.	;	!
(Typed or printed name and unpactity of person signing emission)	_	-MANNESON Spor David Moffenbeier, President		

State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEDSCAPE PORTALS, 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 TWENTY-SIXTH DAY OF DECEMBER, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MEDSCAPE PORTALS, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF DECEMBER, A.D. 2000.

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

SECULIARY OF STATE STATE STATE OF CURTURATIONS

BLUMBI:RGEXCELSIOR 62 WHITE ST., NY, NY 10013 (800)221-2972

3335248 8300

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Edward J. Freel, Secretary of State

AUTHENTICATION: 0876926

DATE: 12-26-00