



THE UNITED STATES  
CORPORATION  
COMPANY

# F01000000300

ACCOUNT NO. : 072100000032

REFERENCE : 967416 7128138

AUTHORIZATION :

*Patricia Pizutto*

COST LIMIT : \$ 87.50

ORDER DATE : January 17, 2001

ORDER TIME : 11:21 AM

ORDER NO. : 967416-005

CUSTOMER NO: 7128138

CUSTOMER: Andrew Fisher, Esq  
Mahon, Patusky, Rothblatt &  
3rd Fl  
1735 Connecticut Ave Nw  
Washington, DC 20009

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FOREIGN FILINGS

NAME: UNITHER TELEMEDICINE SERVICES  
CORP.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull -- EXT# 1115

EXAMINER: *hpr*

1117

FILED  
01 JAN 17 PM 6:00  
RECEIVED  
01 JAN 17 PM 12:00  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
TALLAHASSEE, FLORIDA

**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  
JUN 17 PM 6:00  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

1. Unither Telemedicine Services Corp.  
(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. 52-2151655  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. August 10, 1998 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification  
(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. 1110 Spring Street Silver Spring, Maryland 20910  
(Principal office address)  
1110 Spring Street Silver Spring, Maryland 20910  
(Current mailing address)
8. The purpose of the Corporation is to engage in any lawful act or activity.  
(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  
(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.*

Corporation Service Company

BRIAN COURTNEY, ASST. VP. *as its agent*

(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: Martine Rothblatt

Address: 1110 Spring Street  
Silver Spring, Maryland 20910

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

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

Director: Christopher Patusky

Address: 1110 Spring Street  
Silver Spring, Maryland 20910

Director: Paul A. Mahon

Address: 1110 Spring Street  
Silver Spring, Maryland 20910

B. OFFICERS

President: Christopher Patusky

Address: 1110 Spring Street  
Silver Spring, Maryland 20910

CEO: \_\_\_\_\_

~~Vice President:~~ Martine Rothblatt

Address: 1110 Spring Street  
Silver Spring, Maryland 20910

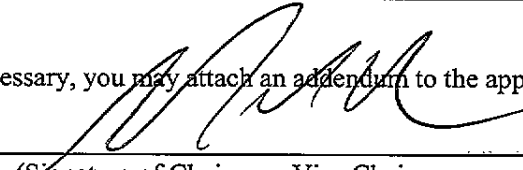
Secretary: Paul A. Mahon

Address: 1110 Spring Street Silver Spring, Maryland 20910

Treasurer: \_\_\_\_\_

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

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. Paul A. Mahon, Secretary  
(Typed or printed name and capacity of person signing application)

FILED  
01 JUN 17 PM 6:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

State of Delaware  
Office of the Secretary of State

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PAGE

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01 JAN 17 PM 6:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNITHER TELEMEDICINE SERVICES CORP." 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 TENTH DAY OF JANUARY, A.D. 2001.



*Harriet Smith Windsor*  
Secretary of State

2930087 8300

AUTHENTICATION: 0907971

010015732

DATE: 01-10-01