

ACCOUNT	NO.	:	072100000032	
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986049 REFERENCE

AUTHORIZATION

COST LIMIT

ORDER DATE: January 31, 2001

ORDER TIME: 3:38 PM

ORDER NO. : 986049-090

100003673331--8

CUSTOMER NO: 4814233

CUSTOMER: Ms. Donna Kendrick

Morris Manning & Martin / (

1600 Atlanta Financial Center 3343 Peachtree St, Northeast

Atlanta, GA 30326

FOREIGN FILINGS

NAME:

INFOCURE CORPORATION



XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

DIVISION OF COMPORATION

CONTACT PERSON: Sandra Mathis -- EXT# 1165

EXAMINER:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		STATUTES, THE FOLLOWING IS SUBMITTED TO T BUSINESS IN THE STATE OF FLOREDA
		HOSINESS IN THE STATE OF PLONADA.
1. InfoCure (TED! "COMPANY" "COPPORATION"
words or abbr	eviations of like import in language as will clear n or partnership if not so contained in the name	arly indicate that it is a corporation instead of a result of a respectively. 3. 59-2248411
2. Delaware		3. 59-2248411
(State or cou	ntry under the law of which it is incorporated)	(FEI number, if applicable)
4. November	27, 1996	5. Perpetual
(D	ate of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Quali		
	(SEE SECTIONS 607.15	not transacted business in Florida, insert "upon qualification.") 01, 607.1502 and 817.155, F.S.)
7. Atlanta, 6	re Corporation , Suite 450, 1765 T A 30339	ne Exchange
,. <u></u>	(Principal office a	ddress)
	•	,
	(Current mailing a ched Rider 2	ddress)
8(Purpos	e(s) of corporation authorized in home state or	country to be carried out in state of Florida)
9. Name and <u>s</u>	treet address of Florida registered agen	t: (P.O. Box or Mail Drop Box NOT acceptable)
Name:	Corporation Service Company	
Office Address:	1201 Hays Street	
	Tallahassee	Florida 32301
	(City)	(Zip code)
Having been no designated in th further agree to	his application, I hereby accept the appoin	rvice of process for the above stated corporation at the place atment as registered agent and agree to act in this capacity. I s relative to the proper and complete performance of my s of my position as registered agent.

(Registered agent's signature)
Laura R. Dunlap, Assistant Vice President

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: See attached officers/directors rider	0
ddress:	PS A T
ice Chairman:	718
ddress:	6 P. Q.
irector:	
ddress:	,
pirector:	
ddress:	
B. OFFICERS	
resident: See attached officers/directors rider	
Address:	, , , ,
/ice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
Autross.	**************************************
NOTE: If necessary, you may attach an addendum to the application	listing additional officers and/or directors.
Marie A	-
13. (Signature of Chairman, Vice Chairman, or any office	r listed in number 12 of the application)
14. James A. Cochran, Secretary (Typed or printed name and capacity of person	e signing application)

OFFICERS/DIRECTORS RIDER

FL-Application by Foreign Corporation for Authorization

InfoCure Corporation

List of Officers

Name: Frederick L. Fine Title: President & CEO

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: James A. Cochran Title: Senior VP & CFO

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: James K. Price Title: Exec. VP & Secretary

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: Richard E. Perlman Title: Chairman & Treasurer

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

List of Directors

Name: James K. Price Term: Aug 10, 2001

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: Richard E. Perlman Term: Aug 10, 2001

Bus. Addr.: c/o c/oInfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: Frederick L. Fine Term: Aug 10, 2001

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: James D. Elliott Term: Aug 10, 2001

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

Name: Raymond H. Welsh Term: Aug 10, 2001

Bus. Addr.: c/o InfoCure Corporation Suite 450, 1765 The Exchange, Atlanta,

Georgia 30339

RIDER 1

InfoCure Corporation

InfoCure's business purpose is to engage in any lawful act or activity for which corporations may be organized, including, but not limited to, the manufacture of predicab and dental practice management software. To engage in any act or activity for which corporations may be organized.

State of Delaware

Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INFOCURE CORPORATION" 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 FIRST DAY OF FEBRUARY, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAKES

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

Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 0949019

DATE: 02-01-01