



F02000001420

ACCOUNT NO. : 072100000032

REFERENCE : 484531 7225868

AUTHORIZATION

Patricia Pigatto

COST LIMIT : \$ 78.75

02 MAR 21 PM 3:16
TALLAHASSEE, FLORIDA

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

RECEIVED
02 MAR 21 AM 11:24
DEPARTMENT OF STATE
DIVISION OF CONSULATIONS
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: KELSON BILLING SERVICES OF
FLORIDA, INC.

BK

XXXX QUALIFICATION (TYPE: CO)

700005139037--8

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

BK

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 SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

FILED
MAR 21 PM 3:16
TALLAHASSEE
FLORIDA
SECRETARY OF STATE

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)

3. 10-0001572

(FEI number, if applicable)

4. December 17, 2001

(Date of incorporation)

5. Perpetual

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

Name: Corporation Service Company

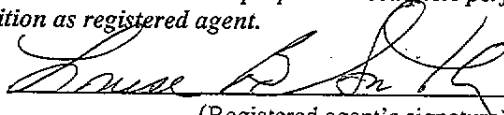
Office Address: 1201 Hays Street

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.



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

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: _____

Address: _____

Director: Lawrence Kries

Address: 90 State House Square, 10th Floor, Hartford, CT 06103

Director: Jeffrey Kinell

Address: 90 State House Square, 10th Floor Hartford, CT 06103

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

President: Lawrence Kries

Address: 90 State House Square, 10th Floor, Hartford, CT 06103

Vice President: Jeffrey Kinell

Address: 90 State House Square, 10th Floor Hartford, CT 06103

Secretary: Jeffrey Kinell

Address: 90 State House Square, 10th Floor, Hartford, CT 06103

Treasurer: Paul A. Hughes (Asst. Secretary)

Address: Mintz, Levin, 157 Church Street, 20th Floor, New Haven, CT 06510

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. Hughes, Treasurer and Asst. Secretary

(Typed or printed name and capacity of person signing application)

Delaware

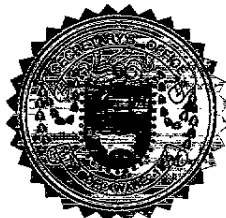
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KELSON BILLING SERVICES OF FLORIDA, 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 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.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

3469648 8300

AUTHENTICATION: 1676897

020183464

DATE: 03-20-02