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TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PALADIN CLAIMS RECOVERY, 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:

Kathryn Knee, Esquire

(Name of Person)

Kathryn Knee, P.A.

(Firm/Company)

1601 Gerbing Road, Suite 210

(Address)

Amelia Island, Florida 32034

(City/State and Zip code)

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-05/10/02--01089--005  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

For further information concerning this matter, please call:

Kathryn Knee

(Name of Person)

at ( 904 ) 491-1781

(Area Code & Daytime Telephone Number)

FILED  
02 MAY 10 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**

Registration 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

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**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.*

1. Paladin Claims Recovery, 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. Texas

(State or country under the law of which it is incorporated)

3. 91-1927715

(FEI number, if applicable)

4. September 2, 1998

(Date of incorporation)

5. perpetual

(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. 3701 Executive Center Drive, Suite 205, Austin, Texas 78731

(Principal office address)

same as above

(Current mailing address)

To provide insurance claim collection services for hospitals and other health care providers and to engage in any lawful act or activity pursuant to Florida Statutes.

8. activity pursuant to Florida Statutes.  
(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: Ed Johnson

Office Address: 1601 Gerbing Road, Suite 260

Amelia Island

(City)

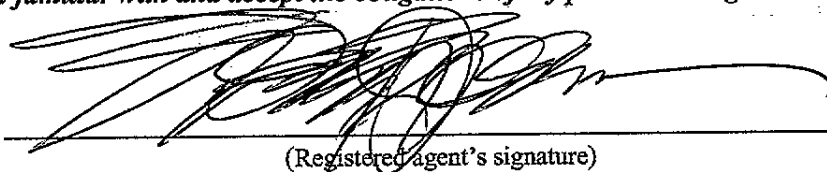
, Florida

32034

(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)

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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Ed Johnson

Address: 1601 Gerbing Road, Suite 260

Amelia Island, Florida 32034

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

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

Director: Susan Moon

Address: 3701 Executive Center Drive, Suite 205

Austin, Texas 78731

Director: \_\_\_\_\_

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

B. OFFICERS

President: Ed Johnson

Address: 1601 Gerbing Road, Suite 260

Amelia Island, Florida 32034

Vice President: Susan Moon

Address: 3701 Executive Center Drive, Suite 205

Austin, Texas 78731

Secretary: Susan Moon

Address: 3701 Executive Center Drive, Suite 205, Austin, Texas 78731

Treasurer: Susan Moon

Address: 3701 Executive Center Drive, Suite 205, Austin, Texas 78731

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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. Ed Johnson, President

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

Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



Gwyn Shea  
Secretary of State

## Office of the Secretary of State

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Articles Of Incorporation for PALADIN CLAIMS RECOVERY, INC. (filing number: 150512700), a Domestic Business Corporation, was filed in this office on September 02, 1998.

**It is further certified that the entity status in Texas is active.**

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 17, 2002.



A handwritten signature in cursive script that reads "Gwyn Shea".

Gwyn Shea  
Secretary of State