

F030000064017

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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CORPDIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

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TALLAHASSEE, FLORIDA

CONTACT: Tricia Tadlock
DATE: 8.13.03
REF. #: 0173.18565
CORP. NAME: Option Services Group, Inc.

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input checked="" type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: _____ | | |

STATE FEES PREPAID WITH CHECK# 505968 FOR \$ 87.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Q Examiner's Initials

**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. Option Services Group, 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. Illinois

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

3. 36-4258341

(FEI number, if applicable)

4. August 7, 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. 500 Technology Drive, Naperville, IL 60563

(Principal office address)

c/o The TriZetto Group, Inc., 567 San Nicolas Dr., Suite 360, Newport Beach, CA 92660

(Current mailing address)

8. Provide information technology products and business services to the healthcare industry

(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: NRAI Services, Inc.

Office Address: 526 E. Park Avenue

Tallahassee

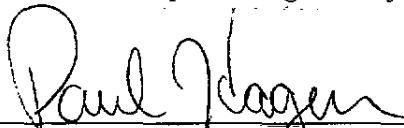
(City)

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)

Paul J. Hagan, 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.

OPTION SERVICES GROUP

Attachment to
Application by Foreign Corporation for Authorization to Transact Business in Florida

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TALLAHASSEE, FLORIDA

Question 12.B.

Additional Officers:

<u>Name</u>	<u>Title</u>	<u>Business Address</u>
Michael J. Sunderland	Senior Vice President and Chief Financial Officer	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660
Kathleen A. Malone	Assistant Secretary	567 San Nicolas Drive, Suite 360 Newport Beach, CA 92660

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

A. DIRECTORS

Chairman: Jeffrey H. Margolis

Address: 567 San Nicolas Drive, Suite 360
Newport Beach, CA 92660

Vice Chairman: None/Not Applicable

Address: _____

Director: Michael J. Sunderland

Address: 567 San Nicolas Drive, Suite 360
Newport Beach, CA 92660

Director: _____

Address: _____

B. OFFICERS - See also Addendum 1

President: Jeffrey H. Margolis

Address: 567 San Nicolas Drive, Suite 360
Newport Beach, CA 92660

Vice President: James J. Sullivan

Address: 567 San Nicolas Drive, Suite 360
Newport Beach, CA 92660

Secretary: James J. Sullivan

Address: 567 San Nicolas Drive, Suite 360, Newport Beach, CA 92660

Treasurer: None/Not Applicable

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. James J. Sullivan, Vice President, General Counsel and Secretary

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

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6007-808-4

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To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

OPTION SERVICES GROUP, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE AUGUST 7, 1998, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this
day of JULY 9TH A.D. 2003

Jesse White

SECRETARY OF STATE