

F03000005494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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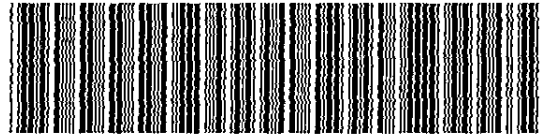
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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03 NOV -4 PM 3:20  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*Handwritten signature/initials*



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032  
REFERENCE : 302883 5048552  
AUTHORIZATION : *Patricia Pizano*  
COST LIMIT : \$ 78.75

FILED  
03 NOV -6 PM 3:20  
TALLAHASSEE, FLORIDA

ORDER DATE : October 30, 2003  
ORDER TIME : 10:15 AM  
ORDER NO. : 302883-005  
CUSTOMER NO: 5048552  
CUSTOMER: Ms. Gina Laredo  
Advancepcs  
Suite 1200 750 West John  
Carpenter Freeway  
Irving, TX 75039

FOREIGN FILINGS

NAME: ACCORDANT HEALTH SERVICES,  
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
XX        CERTIFICATE OF GOOD STANDING

CONTACT PERSON: *SARA LEA*  
~~Susie Knight~~ -- 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*

1. Accordant Health Services, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

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

3. 56-1913577

(FEI number, if applicable)

4. 03/09/1995

(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. 4900 Koger Blvd., Suite 300, Greensboro, NC 27407

(Principal office address)

750 W. John Carpenter Frwy., Ste. 1200, Irving, TX 75039

(Current mailing address)

8. Disease management services.

(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

(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.*

Corporation Service Company

Dolores I. Smith Asst. V.P.

(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: David D. Halbert

Address: 750 W. John Carpenter Frwy., Ste. 1200

Irving, TX 75039

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

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

Director: T. Danny Phillips

Address: 750 W. John Carpenter Frwy., Ste. 1200

Irving, TX 75039

Director: Laura I. Johansen

Address: 750 W. John Carpenter Frwy., Ste. 1200

Irving, TX 75039

## B. OFFICERS

President: David D. Halbert

Address: 750 W. John Carpenter Frwy., Ste. 1200

Irving, TX 75039

Vice President: T. Danny Phillips

Address: 750 W. John Carpenter Frwy., Ste. 1200

Irving, TX 75039

Secretary: Laura I. Johansen      Shawn Shearer, Assistant Secretary

Address: 750 W. John Carpenter Frwy., Ste. 1200, Irving, TX 75039

Treasurer: Stephen Houk

Address: 750 W. John Carpenter Frwy., Ste. 1200, Irving, TX 75039

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Shawn Shearer, Assistant Secretary

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

# Delaware

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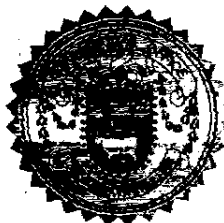
## *The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACCORDANT HEALTH SERVICES, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACCORDANT HEALTH SERVICES, INC." WAS INCORPORATED ON THE NINTH DAY OF MARCH, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

2487708 8300

AUTHENTICATION: 2722382

030699895

DATE: 10-31-03