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N SERVICE COMPANY™
ACCOUNT NO. : 072100000032
REFERENCE : 467656 7185770
REFERENCE : 467656 7185770 AUTHORIZATION : Strice First COST LIMIT : \$ 70.00
COST LIMIT : \$ 70.00
ORDER DATE: March 1, 2004
ORDER TIME: 8:39 AM
ORDER NO. : 467656-010
CUSTOMER NO: 7185770
CUSTOMER: Eli Pearlman, Esq. Michelman & Robinson, Llp Suite 500 15760 Ventura Boulevard Encino, CA 91436
FOREIGN FILINGS
NAME: HEALTHCARE CONSULTING, INC.
XXXX QUALIFICATION (TYPE: <u>CO</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Darlene Ward EXT# 2935

EXAMINER:

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

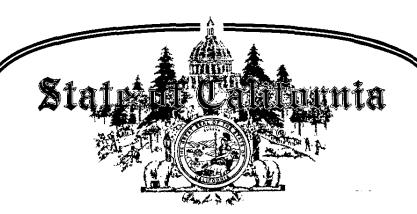
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA REGISTER A FOREIGN CORPORATION TO TRANSAC	A STATUTES, THE FOLLOWING IS SUBMITTED TO CONTROL OF BUSINESS IN THE STATE OF FLORIDA CONTROL OF THE STATE OF
1. Healthcare Consulting, Inc.	
(Enter name of corporation; must include "INCORPORAT" "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"
HCC Office WorksRx, Inc.	
(If name unavailable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)
2. California	3. 95-4840814
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. January, 16 2001	5. Perpetual
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification	
(Date first transacted business in Florida. If corporation has	s not transacted business in Florida, insert "upon qualification.") 1501, 607.1502 and 817.155, F.S.)
7. 3001 N. Rocky Point Drive East, Suite 247, To	ampa Fl. 33607
(Principal office	address)
18801 Ventura Blvd., Suite 205, Tarzana CA 9	91356
(Current mailing	
8. Healthcare billing and labor placement service	es
(Purpose(s) of corporation authorized in home state of	or country to be carried out in state of Florida)
9. Name and street address of Florida registered age	nt: (P.O. Box or Mail Drop Box NOT acceptable)
Name: <u>Corporation Service Compar</u>	ny
Office Address: 1202 Hays Street	
Tallahassee	Florida 32301
(City)	(Zip code)
designated in this application, I hereby accept the appo	service of process for the above stated corporation at the place pintment as registered agent and agree to act in this capacity. It tes relative to the proper and complete performance of my duties y position as registered agent.
11. Attached is a certificate of existence duly authentica	tted, not more than 90 days prior to delivery of this application to

the Department of State, by the Secretary of State of 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: Gary Aleksintser
Address: 3722 Balina Cyn. Rd.,
Encino, CA 91436
Vice Chairman: H. Tom Buelter
Address: 18801 Ventura Blvd. Suite 205
Tarzana, CA 91356
Director: Kathy West-Buelter
Address: 18801 Ventura Blvd. Suite 205
Tarzana, CA 91356
Director: James Frank
Address: 18801 Ventura Blvd. Suite 205
Tarzana, CA 91356
B. OFFICERS
President: Gary Aleksintser
Address: 3722 Balina Cyn. Rd., Encino, CA 91436
Encino, CA 91436
Vice President: Michelle F. Schuckmann
Address: 18801 Ventura Blvd. Suite 205
Tarzana, CA 91356
Secretary: Gary Aleksintser
Address: 3722 Balina Cyn. Rd., Encino, CA 91436
Treasurer: Gary Aleksintser
Address: 3722 Balina Cyn. Rd., Encino, CA 91436
NOTE: If necessary, you may attacher addendum to the application listing additional officers and/or directors.
(Signature of Director Officer listed in number 12 of the application)
14. GARY AKKSID TER CEO/PRESIDENT
(Typed or printed name and capacity of person signing application)



SECRETARY OF STATE

CERTIFICATE OF STATUS DOMESTIC CORPORATION

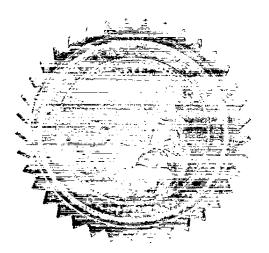
I, KEVIN SHELLEY, Secretary of State of the State of California, hereby certify:

That on the **16th day of January**, **2001**, **HEALTHCARE CONSULTING**, **INC.** became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 4, 2004.

KEVIN SHELLEY Secretary of State