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To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 : (850) 222-1173 Fax Number : (850)224-1640

## FOREIGN PROFIT/NONPROFIT CORPORATION

MEDNET BENEFITS GROUP, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

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## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

From: Katie Wonsch

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.	MEDNET BEN	NEFITS GROUP, INC.				
		corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	-	
	(If name unavail	able in Florida, enter alternate corporate nai	me	adopted for the purpose of transacting business in Florida)	<del>-</del>	
2.	Delaware	•	3.	•		
		under the law of which it is incorporated)	•	(FEI number, if applicable)	-	
4.	August 25, 200	03	5.	Perpetual	_	
	(Date	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	_	
6.	<u></u>				-	
				n Florida, if prior to registration) 502, F.S., to determine penalty liability)		
7	501 Shepherd	Street, Winston Salem, NC 27103		•		
٠.		' (Principal office a	ıdd	ress)	-	
	501 Shepherd	Street, Winston Salem, NC 27103		•		
		(Current mailing a	ıdd	ress)	•	
8.		the corporation is to supply access to reduce d any other lawful act or activity for which co		ates on medical services through a network of providers col rations are organized.	ntracted t	у
	(Purpose(s	s) of corporation authorized in home state or	ca	untry to be carried out in state of Florida)	331	-
9.	Name and stree	et address of Florida registered agent: (f	P.C	Box NOT acceptable)	σ 1	5
	Name:	NRAI Services, Inc.		SEE SEE	8	ווו
O:	ffice Address:	2731 Executive Park Dr., Ste 4		Es.	PH -	O
		Weston		, Florida 33331	1:09	
		(City)		(Zip code)	9	

10. Registered agent's acceptance:

NRAI Services, Ing

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)

Louie Tamantini, Vice President

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.

From: Katie Wonsch

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

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SECRETARY OF STATE

A. DIRECTORS	MELAHASSEE, FLORIDA
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address: 4146 Bethesda Road	
Stouffville, Ontario Canada L4A 7X5	
Director: Edie Almasi	
Address: 4146 Bethesda Road	
Stouffville, Ontario Canada L4A 7X5	
B. OFFICERS  President:  Howard Cracower	
Address: 4146 Bethesda Road	
Stouffville, Ontario Canada L4A 7X5	
Vice President:	
Address:	
Secretary:	
Address: 4146 Bethesda Road, Stouffvile, Ontario Canada L4A 7X5	
Treasurer: Edle Almasi	
Address: 4146 Bethesda Road, Stouffvile, Ontario Canada L4A 7X5	
NOTE: If necessary you may attach an addendum to the application listing ad	ditional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the	he application)
Howard Cracower, President/CEO	
(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 "MEDNET BENEFITS GROUP, 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 SEVENTH DAY OF FEBRUARY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MEDNET BENEFITS GROUP, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF AUGUST, A.D. 2003.

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.

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Harrlet Smith Windsor, Secretary of State AUTHENTICATION: 5416292

DATE: H07000095444 3

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