

BLUMBERG EXCELSIOR

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**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

FOREIGN PROFIT/NONPROFIT CORPORATION

Truscript Solutions, Inc.

Certificate of Status	0
Certified Copy	0

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 OCT -4 PM 1:53

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860-617-6381

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Florida Dept of State



October 3, 2007

FLORIDA DEPARTMENT OF STATE

BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Division of Corporations

SUBJECT: TRUSCRIPT SOLUTIONS, INC.
REF: W07000048979

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Regulatory Specialist II

FAX Aud. #: H07000245458
Letter Number: 207A00057851

P.O BOX 6327 - Tallahassee, Florida 32314

**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. Truscript Solutions, Inc.

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

(FBI number, if applicable)

4. 6/27/07

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607

(Principal office address)

3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607

(Current mailing address)

8. Medical transcript preparation

(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 NOT acceptable)

Name: **BlumbergExcelsior Corporate Services, Inc.**

Office Address: **4435 Old Winter Garden Rd.**

Orlando

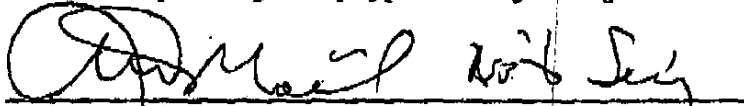
(City)

Florida 32811

(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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Herkishen B. VaswaniAddress: 3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607Vice Chairman: Ravi VaswaniAddress: 3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607Director: Raj SundarAddress: 3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607

Director: _____

Address: _____

B. OFFICERS

President: Ravi VaswaniAddress: 3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607Chief Executive Officer, Raj SundarAddress: 3111 W Dr Martin Luther King Jr Blvd., Tampa, FL 33607

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. Raj Sundar, Chief Executive Officer
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRUSCRIPT SOLUTIONS, 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 TWELFTH DAY OF JULY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRUSCRIPT SOLUTIONS, INC." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF JUNE, A.D. 2007.

4379915 8300

070808154



Harriet Smith Windsor
AUTHENTICATION: 5838955
Harriet Smith Windsor, Secretary of State

DATE: 07-12-07