

F090000002498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

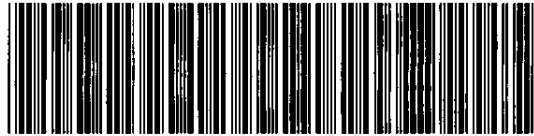
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W09-27000



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06/08/09--01013--019 **70.00

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DIVISION OF CORPORATION
2009 JUN 19 AM 10:24

6/23/09

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: A.D.A.M., INC

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SUSAN CHANG

Name of Person

A.D.A.M., INC

Firm/Company

10 TENTH STREET NE, STE 525

Address

ATLANTA, GA 30309

City/State and Zip code

schang@adamcorp.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUSAN CHANG

Name of Person

at (404) 604-2757

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

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June 9, 2009

SUSAN CHANG
10 TENTH STREET NE
SUITE 525
ATLANTA, GA 30309

SUBJECT: A.D.A.M., INC
Ref. Number: W09000027000

We have received your document for A.D.A.M., INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 909A00019336

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**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. A.D.A.M., INC

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

A.D.A.M. SOFTWARE INC.

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

2. GEORGIA

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

3. 58-1878070

(FEI number, if applicable)

4. 02/08/1990

(Date of incorporation)

5. PERPETUAL

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

6. 01/01/2009

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

7. 10 TENTH STREET NE, STE 525 ATLANTA, GA 30309

(Principal office address)

10 TENTH STREET NE, STE 525 ATLANTA, GA 30309

(Current mailing address)

8. Healthcare/benefit information and technology 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 NOT acceptable)

Name: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive, Suite 4

Weston, Florida 33331
(City) (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.

NRAI Services, Inc.

James M. Howarth Asst Secy
(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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12. Names and business addresses of officers and/or directors:

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A. DIRECTORS

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Chairman: Robert S. Cramer, Jr.

Address: 10 Tenth St. NE Suite 525
Atlanta, GA 30309

Vice Chairman: none

Address: _____

Director: Clay E. Scarborough

Address: 10 Tenth St NE Suite 525
Atlanta GA 30309

Director: Mark Kishel, M.D.

Address: 10 Tenth St NE Suite 525
Atlanta GA 30309

B. OFFICERS

President: Kevin Noland

Address: 10 Tenth St NE Suite 525
Atlanta GA 30309

Vice President: none

Address: _____

Secretary: Mark Adams

Address: 10 Tenth St NE Suite 525 Atlanta GA 30309

Treasurer: Mark Adams

Address: 10 Tenth St NE Suite 525 Atlanta GA 30309

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

13. Mark B Adams
(Signature of Director or Officer listed in number 12 of the application)

14. Mark B Adams
(Typed or printed name and capacity of person signing application)

Control No. K002617

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

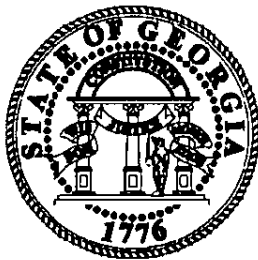
A.D.A.M., INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 02/08/1990 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 21st day of April, 2009

Karen C Handel
Secretary of State

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DIVISION OF CORPORATIONS
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