

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : C T CORPORATION SYSTEM
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Phone : (850) 222-1092
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FOREIGN PROFIT/NONPROFIT CORPORATION

Ingenix MergerCo, Inc.

Certificate of Status	0
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Help

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. Ingenix MergerCo, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ino.," "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. 27-0963363

(FBI number, if applicable)

4. 09/17/2009

(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. 12125 Technology Drive, Eden Prairie, MN 55344

(Principal office address)

same

(Current mailing address)

8. Health Information and Consulting 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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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.

By: [Signature]
(Registered agent's signature)

Michele Miller
Assistant Secretary

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:

A. DIRECTORS SEE ATTACHMENT

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Andrew M. Slavitt

Address: 12125 Technology Drive

Eden Prairie, MN 55344

Director: Lee D. Valenta

Address: 12125 Technology Drive

Eden Prairie, MN 55344

B. OFFICERS SEE ATTACHMENT

President: Andrew M. Slavitt

Address: 12125 Technology Drive

Eden Prairie, MN 55344

Vice President: John Kelly

Address: 12125 Technology Drive

Eden Prairie, MN 55344

Secretary: Karin A. Keitel

Address: 12125 Technology Drive, Eden Prairie, MN 55344

Treasurer: Robert W. Oberender

Address: 12125 Technology Drive, Eden Prairie, MN 55344

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. Brigid M. Spicola, Assistant Secretary

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

**Attachment to Florida
Officers & Directors**

- | | | |
|---|-------------------|--------------------------------|
| 1 | Full Name: | Lee D. Valenta |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | Exec. VP, COO and Asst. Treas. |
| | Director's Title: | Other Director |
| | Business Address: | 12125 Technology Drive |
| | City: | Eden Prairie |
| | State: | MN |
| | ZIP Code: | 55344 |
| 2 | Full Name: | Michael D. Michaux |
| | Officer/Director: | Officer, Director |
| | Officer's Title: | Exec. VP and Asst. Sec. |
| | Director's Title: | Other Director |
| | Business Address: | 12125 Technology Drive |
| | City: | Eden Prairie |
| | State: | MN |
| | ZIP Code: | 55344 |
| 3 | Full Name: | David Ostler |
| | Officer/Director: | Officer |
| | Officer's Title: | Sr. VP |
| | Director's Title: | |
| | Business Address: | 12125 Technology Drive |
| | City: | Eden Prairie |
| | State: | MN |
| | ZIP Code: | 55344 |
| 4 | Full Name: | Gerald J. Knutson |
| | Officer/Director: | Officer |
| | Officer's Title: | CFO and Asst. Treas. |
| | Director's Title: | |
| | Business Address: | 12125 Technology Drive |
| | City: | Eden Prairie |
| | State: | MN |
| | ZIP Code: | 55344 |
| 5 | Full Name: | Brigid M. Spicola |

Officer/Director:

Officer

Officer's Title:

Assistant Secretary

Director's Title:

Business Address:

12125 Technology Drive

City:

Eden Prairie

State:

MN

ZIP Code:

55344

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INGENIX MERGERCO, 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 THIRTIETH DAY OF SEPTEMBER, A.D. 2009.


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

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090897944

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7557606

DATE: 09-30-09