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2009 DEC 21 A 9:00

TO: **New Filing Section** SECRETARY OF STATE Division of Corporations TALLAHASSEE, FLORIDA SUBJECT: Merge Healthcare Incorporated 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," or "Certificate of Good Standing"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: Julie Ann B. Schumitsch Name of Person Merge Healthcare Incorporated Firm/Company 6737 West Washington Street, Suite 2250 Address Milwaukee, Wisconsin 53214-5650 City/State and Zip code jschumitsch@merge.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (414) 977-4000

Area Code & Daytime Telephone Number Ann G. Mayberry-French Name of Person **MAILING ADDRESS:** STREET/COURIER ADDRESS: **New Filing Section New Filing Section** Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: ✓ \$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee,

Certified Cop

Certificate of Status & Certified Copy

Certificate of Status

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDATE 21 A 9:00

1.	Merge Health	ncare Incorporated		AFADETADA OT OT	۲,
	(Enter name of co	orporation; must include "INCORPORATE rp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION LLAHASSEE, FLO	, }(
	(If name unavaila	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in Florida)	
2.	Delaware		3.	39-1600938	
	(State or country u	under the law of which it is incorporated)		(FEI number, if applicable)	
4.	October 14, 2	2008	5.	Perpetual	
	(Date	of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
6.	Upon qualific	ation.			
		,		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7.	6737 West W	ashington Street, Suite 2250; Mi	ilw	aukee, WI 53214-5650	
		(Principal office	add	ress)	
	6737 West W	ashington Street, Suite 2250; M	ilw	aukee, WI 53214-5650	
		(Current mailing	add	ress)	
8.	Medical tech	nology software sales and servi	ce.		
	(Purpose(s)	of corporation authorized in home state o	rcc	ountry to be carried out in state of Florida)	
9.	Name and street	t address of Florida registered agent: (P.C	D. Box NOT acceptable)	
	Name:	NRAI Services, Inc.			
o	ffice Address:	2731 Executive Park Drive, Su	iite	4	
		Weston		, Florida 33331	
		(City)		(Zip code)	
	o T o 14 T	49			

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.

(Registered agent's signature)
Laura Lightholder, 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.

12. Names and business addresses of officers and/or directors:	FILED
A. DIRECTORS	
Charman: Michael W. Ferro, Jr.	2009 DEC 21 A 9: 0
Address: 233 North Michigan Avenue, Suite 2330	SECRETARY OF STATE
Chicago, Illinois 60601	SECRETARY OF STATE TALLAHASSEE, FLORID
Vice Chairman:	
Address:	
Director: Justin C. Dearborn	
Address: 6737 West Washington Street, Suite 2250	
Milwaukee, Wisconsin 53214-5650	
øirector: Gregg G. Hartemayer	
Address: 6737 West Washington Street, Suite 2250	
Milwaukee, Wisconsin 53214-5650	
B. OFFICERS	
President: Justin C. Dearborn (Chief Executive Officer)	
Address: 6737 West Washington Street, Suite 2250	
Milwaukee, Wisconsin 53214-5650	
/ _{Vice President:} Ann G. Mayberry-French (Vice President & General Counsel))
Address: 6737 West Washington Street, Suite 2250	
Milwaukee, Wisconsin 53214-5650	
Secretary: Ann G. Mayberry-French	
Address: 6737 West Washington Street, Suite 2250; Milwaukee, Wisconsin	53214-5650
Treasurer: Steven M. Oreskovich (Chief Financial Officer & Treasurer)	
Address: 6737 West Washington Street, Suite 2250; Milwaukee, Wisconsin	53214-5650
NOTE: If necessary, you may attach an addendum to the application listing additional o	fficers and/or directors.
3. Signature of Director or Officer listed in number 12 of the applica	ution)
Ann G. Mayberry-French, Corporate Secretary	,

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

FILED

MERGE HEALTHCARE INCORPORATED, a Delaware corporation

2009 DEC 21 A 9:00

DIRECTORS:

DIRECTORS:	SECRETARY OF STATE
Name	SECRETARY OF STATE Business Äddréss ASSEE, FLORIDA
Dennis Brown	6737 West Washington Street, Suite 2250 Milwaukee, Wisconsin 53214
Justin C. Dearborn	6737 West Washington Street, Suite 2250 Milwaukee, Wisconsin 53214
Michael W. Ferro, Jr.	233 North Michigan, Suite 2330 Chicago, Illinois 60601
Gregg G. Hartemayer	6737 West Washington Street, Suite 2250 Milwaukee, Wisconsin 53214
Richard A. Reck	6737 West Washington Street, Suite 2250 Milwaukee, Wisconsin 53214
Neele E. Stearns, Jr.	6737 West Washington Street, Suite 2250 Milwaukee, Wisconsin 53214

OFFICERS:

<u>Name</u>	Office	Business Address
Justin C. Dearborn	Chief Executive Officer	6737 West Washington Street Suite 2250 Milwaukee, Wisconsin 53214
Steven M. Oreskovich	Chief Financial Officer & Treasurer	6737 West Washington Street Suite 2250 Milwaukee, Wisconsin 53214
Nancy J. Koenig	President, Merge Fusion	6737 West Washington Street Suite 2250 Milwaukee, Wisconsin 53214
Antonia A. Wells	President, Merge OEM	6509 Airport Road Mississauga, Ontario L4V 1S7 Canada
Ann G. Mayberry-French	Vice President, General Counsel & Corporate Secretary	6737 West Washington Street Suite 2250 Milwaukee, Wisconsin 53214
Julie Ann B. Schumitsch	Assistant Corporate Secretary	6737 West Washington Street Suite 2250 Milwaukee, Wisconsin 53214

Delaware PAGE FILED

The First State

2009 DEC 21 A 9:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MERGE HEALTHCARE INCORPORATED" 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 NOVEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MERGE HEALTHCARE INCORPORATED" WAS INCORPORATED ON THE FOURTEENTH DAY OF OCTOBER, A.D. 2008.

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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Jeffrey W. Bullock, Secretary of State TION: 7636322 AUTHENTYCÀ

DATE: 11-12-09

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



FILED

December 11, 2009

2009 DEC 21 A 9:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Florida Department of State Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Subject: Merge Healthcare Incorporated

Filing No. F03000001173

Dear Sir/Madam:

With respect to the change of our state of jurisdiction from Wisconsin to Delaware, enclosed with this correspondence is our Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida (Merge Healthcare Incorporated, a Wisconsin corporation). For the \$35.00 filing fee and the \$8.75 certified copy fee, please utilize the \$43.75 previously submitted to the Florida Department of State that you did not return to us.

Also enclosed with this correspondence is our Application by Foreign Corporation for Authorization to Transact Business in Florida (Merge Healthcare Incorporated, a Delaware corporation), in duplicate, together with our check number 061284 in the amount of \$70.00 with respect to the filing fee of our Application. Included with our Application is our Good Standing Certificate as provided by the Delaware Secretary of State.

If you have any questions regarding this filing, please do not hesitate to contact me directly at 414.977.4397.

Respectfully,

MERGE HEALTHCARE INCORPORATED

Julie Ann B. Schumitsch

Corporate & Regulatory Specialist

Assistant Corporate Secretary

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Enclosures