### Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

100173.165460

From:

Account Name : CORPDIRECT AGENTS, INC.

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

\*\*Enter the email address for this business entity to be used for forcer annual report mailings. Enter only one email address please.

Email Address:

# FOREIGN PROFIT/NONPROFIT CORPORATION QUALITY SYSTEMS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

J. Shivers

#### **COVER LETTER**

TO: New Filing Sec Division of Cor				
emmer. Qualit	ly Systems, Inc.			
SUBJECT:		ation - must include suffix		
Dear Sir or Madam:				
	: b. F! 0	. South and the state of the same	Desired in Plants	
"Certificate of Existence		for Authorization to Transact Standing" and check are subm Isiness in Florida.		
Please return all corresp	ondence concerning this m	atter to the following:		
Laurie Biegel				
		e of Person		
Rutan & Tucke	<del></del>			
2444		Сотралу		
611 Anton Blvc	<del></del>	<del> </del>	<del></del>	
0-4-14 04	•	.ddress		
Costa Mesa, CA	· · · · · · · · · · · · · · · · · · ·	-4		
· Jleavitt@qsii.com	•	ate and Zip code	LA PER	ė.
<u> </u>		sed for future annual report no	tification)	17
For further information	concerning this matter, plea	ase call:	PY COSEE.	Pary.
Laurie Biegel	714	\$ \662-4660	From M	•
Name of Person	n A	662-4660 rea Code & Daytime Telephon	FEOTO S O	,
STREET/COU New Filing Sect Division of Con Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	MAILING AD New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	fon porations	
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	

## 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.

(U name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in	n Florida)
2. California		95-2888568	
,	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 04/24/1974		Perpetual	
•	of incorporation)	(Duration: Year corp. will cease to exist or "pe	zpetuar)
6. <u>April 1, 2012</u>	(Date first transacted business	in Plorida, if prior to registration) 1502, P.S., to determine penalty liability)	
<sub>7.</sub> 18111 Von	Kaman Avenue, Suite 700, I	rvine, CA 92612	
	(Principal office add		<del></del>
Same			
	(Ourrent mailing adbased practice management) of corporation authorized in home state or c	t and electronic health re∞rds	ECRETARY SECRETARY SECRETARY
9. Name and street	t address of Plorida registered agent: (P.	O. Box NOT acceptable)	Z4 SEE
Name:	C T Corporation System		a m
	1200 South Pine Island Road		
Office Address:	1200 Octobri into Idiana ricea		
•	Plantation	Florida 33324	5 5
•		Florida 33324 (Zip code)	
Office Address:  10. Registered as Having been nam designated in this further agree to co	Plantation (City)  gent's acceptance: and as registered agent and to accept serve application, I hereby accept the appoint	vice of process for the above stated corporation tment as registered agent and agree to act in relative to the proper and complete performa	on at the place this capacity. I

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:	
A. DIRECTORS	
Chairman: N/A	
Address:	
Vice Chairman: N/A	
Address:	
	······································
Director: Murray Brennan	
Address: 18111 Von Karman Avenue, Suite 700, Irvine, CAS	92612
Constant Drietal	
Director: George H. Bristol	
Address: 18111 Von Karman Avenue, Suite 700, Irvine, C	SA 92012
B. OFFICERS	
President: Steven Plochocki	
Address: 18111 Von Karman Avenue, Suite 700, Irvine, CA 92612	7
Vice President: James Sullivan	IPR
Address: 18111 Von Karman Avenue, Suite 700, Irvine, CA 92612	
	THE IT
Secretary: James Sullivan	SE S C
Address: 18111 Von Karman Avenue, Suite 700, Irvine, CA 92612	5
Treasurer: Paul A. Holt	
Address: 18111 Von Karman Avenue, Suite 700, Irvine, CA 92612	
NOTE: If necessary, you may attach an addendum to the application listing additions	al officers and/or directors,
13. Signature of Director or Officer	
The officer or director against this document (and who is listed in number 12 above) a are true and that he or she is aware that false information submitted in a document to third degree felony as provided for in s.817.155, F.S.	affirms that the facts stated herein he Department of State constitutes a
14. James Sullivan, Secretary	
(Typed or printed name and appealty of a man significance)	

#### **EXHIBIT A**

#### QUALITY SYSTEMS, INC.

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

12. A.

Additional Directors.

Maureen Spivack	18111 Von Karman Avenue, Suite 700, Irvine, CA 92612
Ahmed Hussein	18111 Von Karman Avenue, Suite 700, Irvine, CA 92612
Craig Barbarosh	18111 Von Karman Avenue, Suite 700, Irvine, CA 92612
Russell Pflueger	18111 Von Karman Avenue, Suite 700, Irvine, CA 92612
Sheldon Razin	18111 Von Karman Avenue, Suite 700, Irvine, CA 92612
Steven Plochocki	18111 Von Karman Avenue, Suite 700, Irvine, CA 92612

2012 APR 24 AM ID; 47
SECRETARY OF SIGNE, AM
TALLAHASSEE, FLORIE,

### State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

QUALITY SYSTEMS, INC.

FILE NUMBER:

FORMATION DATE:

TYPE:

JURISDICTION:

STATUS:

C0706809

04/24/1974

DOMESTIC CORPORATION CALIFORNIA

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 13, 2012.

> **DEBRA BOWEN** Secretary of State