

FI400001176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

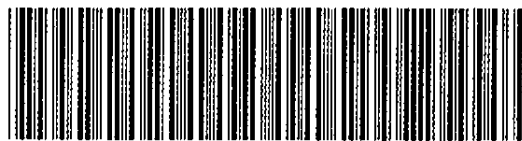
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
14 MAR 17 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RECEIVED  
DEPARTMENT OF STATE  
14 MAR 17 AM 10:42

MAR 18 2014

J. BRYAN



CORPORATION SERVICE COMPANY\*

ACCOUNT NO. : I20000000195

REFERENCE : 050102 4324989

AUTHORIZATION :

COST LIMIT :

\$ 70.00

FILED  
14 MAR 17 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

ORDER DATE : March 12, 2014

ORDER TIME : 3:18 PM

ORDER NO. : 050102-020

CUSTOMER NO: 4324989

*Conversion was filed in  
domestic state. The LLC  
will draw on 3-4-14. This  
is the goal of converted entity.*

FOREIGN FILINGS

NAME: HEALTH OUTCOMES SCIENCES,  
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Health Outcomes Sciences, Inc.

Name of corporation - must include suffix

**FILED**  
14 MAR 17 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip code

Bnash@sycr.com

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

For further information concerning this matter, please call:

Brittany Nash

Name of Person

at ( 949 ) 725-4000

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

**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.*

**FILED**  
14 MAR 17 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Health Outcomes Sciences, Inc.

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

(FEI number, if applicable)

4. 01/22/2010

(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. 7400 W. 132nd Street, Suite 350, Overland Park, KS 66213

(Principal office address)

7400 W. 132nd Street, Suite 350, Overland Park, KS 66213

(Current mailing address)

8. Healthcare information 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: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(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.*

Corporation Service Company

By: 

(Registered agent's signature)

**Sue G. Knight**  
**Assistant Vice President**

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: [SEE ATTACHMENT A]

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: [SEE ATTACHMENT A]

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

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

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Matthew J Wilson / President of CEO

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

FILED  
16 MAR 17 AM 8:05  
TALLAHASSEE FLORIDA  
SECRETARY OF STATE

ATTACHMENT A

FILED  
14 MAR 17 AM 8:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**Health Outcomes Sciences, Inc. - Officers**

Name	Title	Address
Michael Fiorito	Vice President, Chief Operating Officer, Treasurer and Secretary	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
John Spertus	Chief Medical Officer	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
Jim Stickley	Chief Technology Officer	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
Matthew Wilson	President and Chief Executive Officer	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213

**Health Outcomes Sciences, Inc. - Directors**

Name	Address
Brian Burns	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
Keith Harrington	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
Charles McKay	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
James Spertus	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
John Spertus	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213
Matthew Wilson	7400 W. 132nd Street, Suite 350, Overland Park, KS 66213

# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEALTH OUTCOMES SCIENCES, 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 MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HEALTH OUTCOMES SCIENCES, INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF JANUARY, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

4756244 8300

140322387

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1201533

DATE: 03-12-14