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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates o	of Status		
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SEP 3 0 2015 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	,		
iMedScan Corp			
SUBJECT:		and in the description	
Name of	corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp" (Certificate of Existence," or "Certificate of above referenced foreign corporation to tra	of Good Stan	ding" and check are submitted t	
Please return all correspondence concernin H Wayne Hayes Jr	g this matter	to the following:	
	Name of	Person	<u></u>
PatientTrac Information Technology Corp	•		
	Firm/Com	pany	
975 Arthur Godfrey Road, Suite 401			至名 码
Miami Beach, Florida 33140	Addre	ess	SP 2
wayne@patienttrac.com	City/State a	nd Zip code	
E-mail address:	(to be used t	or future annual report notificat	ion) 🚉
For further information concerning this ma	tter, please o	all:	
H Wayne Hayes Jr	305	428-8326	
Name of Person	Area Cod	Daytime Telephone Nu	ımber
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	:	MAILING ADDRES Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231	ons
Enclosed is a check for the following amou	nt:		
□ \$70.00 Filing Fee □ \$78.75 Filing Certificate of		Certified Copy C	7.50 Filing Fee, ertificate of Status &

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. iMedScan Corp 1. (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) Delaware 47-4963426 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) September 1, 2015 (Date of duration, if other than perpetual) (Date of incorporation) September 23, 2015 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 975 Arthur Godfrey Road, Suite 401, Miami Beach, Florida 33140 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) H Wayne Hayes Jr Name: 975 Arthur Godfrey Road, Suite 401 Office Address:

9. Registered agent's acceptance:

Miami Beach

(City)

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.

(Registered agent's signature)

. Florida

(Zip code)

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS H Wayne Hayes Jr Chairman: 975 Arthur Godfrey Road, Suite 401 Address: Miami Beach, Florida 33140 Vice Chairman: Valeria Sidorovich Director: 975 Arthur Godfrey Road, Suite 401 Address: Miami Beach, Florida 33140 Director: Address: **B. OFFICERS** H Wayne Hayes Jr President: 975 Arthur Godfrey Road, Suite 401 Address: Miami Beach, Florida 33140 Valeria Sidorovich Vice President: 975 Arthur Godfrey Road, Suite 401 Address: Miami Beach, Florida 33140 Valeria Sidorovich Secretary: 945 Arthur Godfrey Road, Suite 401, Miami Beach, Florida 33140 Address: _ Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or side is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$.817.155, F.S.

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

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "IMEDSCAN CORP" 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 TWENTY-FOURTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IMEDSCAN CORP"

WAS INCORPORATED ON THE SECOND DAY OF SEPTEMBER, A.D. 2015.

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

a at corn delaware grow/aut

Authentication: 10124476

Date: 09-24-15

5814899 8300 SR# 20150251915