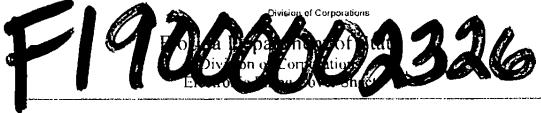
5/10/2019



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614)280-3338

Fax Number

: (954)208-0845

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

Email Address:__

FOREIGN PROFIT/NONPROFIT CORPORATION

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O SIMMONS

WN 1 6 2019

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.

Ī.	MedeAnalytics, Inc.					
	(Enter name of corporation; must include "INCORPORATE "inc.," "Co.," "Corp," "Inc." "Co," or "Corp.")	Ð,	" "COMPANY," "CORPORATION,"			-
	(If name unavailable in Florida, enter alternate corporate nar	ne	adopted for the purpose of transacting by	ısiness in Fl	orida)	_
2.	Delaware	3.	94-3189331			_
	(State or country under the law of which it is incorporated)		(FEI number, if applic	able)		
4.	09/21/1993	5.	Perpetual			
	(Date of incorporation)	•	(Date of duration, if other than	perpetual)		_
6.	01/01/2019					
_	(SEE SECTIONS 607.1501 & 607 501 W. President George Bush Highway, Suite 250, Richards	7.1 soi	n Florida, if prior to registration) 502, F.S., to determine penalty liability) a, TX 75080 pal office address)	第八章 数3章 章	10 11/1/10	77
-	(Current ma	ili	ng address, if different)	: 1.		بسار زیا
	Name and <u>street address</u> of Florida registered agent: (I Name: <u>CT Corporation System</u> fice Address: <u>1200 South Pine Island Road</u>	P. 0	D. Box NOT acceptable)		是 9: 15	
	Plantation		, Florida 33324			
	(City)		(Zip code)			

9. 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: CT Corporation System Alfred Younan Assistant Secretary

(Registered agent's signature)

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 a	and business	addresses of	officers	and/or direct	ors:
-----	---------	--------------	--------------	----------	---------------	------

Address: 501 W. President George Bush	Highway, Suite 250	
Richardson, TX 75080		
Vice Chairman;	T	
Address:	-	The state of the s
Doub A. Zubur		
Address: 501 W. President George Bush	riighway, Suite 250	
Richardson, TX 75080		
Address: 501 W. President George Bush	Highway, Suite 250	- <u> </u>
Richardson, TX 75080		-
B. OFFICERS SEE ATTACHMENT		
Address: 501 W. President George Bush.	Highway, Suite 250	
Richardson, TX 75080		1
/ice President:		
Address:		
ecretary:		
ddress:		
reasurer:		
ddress:		
IOTE: If necessary, you may attach a	an addendum to the application listing	gadditional officers and/or directors.
2.	Signature of Director or Officer	
he officer or director signing this roc	ument (and who is listed in number 1	I above) affirms that the facts stated herei
e true and that he or she is aware that	l false information submitted in a docu s.817.155, F. <u>S.</u>	ument to the Department of State constitut

Attachment to Florida Officers & Directors

1 Full Name: James Hagan

Officer/Director: Officer

Officer's Title: Chief Financial Officer, Chief Administrative Officer and Corporate

Secretary

Director's Title:

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson State: TX ZIP Code: 75080

2 Full Name: S. Scott Crabill Officer/Director: Officer, Director

Officer's Title: Vice President and Assistant Secretary

Director's Title: Director

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson
State: TX
ZIP Code: 75080
Full Name: Tyler Downs

3 Full Name: Tyler Downs
Officer/Director: Officer

Officer's Title: Chief Technology Officer

Director's Title:

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson

State: TX
ZIP Code: 75080
4 Full Name: Paul Kaiser
Officer/Director: Officer, Director

Officer's Title: President & CEO

Director's Title: Director

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson
State: TX
ZIP Code: 75080
5 Full Name: Eric Shuey
Officer/Director: Director

Officer's Title:

Director's Title: Other Director

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson State: TX ZIP Code: 75080

6 Full Name: Michael J. Supple

Officer/Director: Director

Officer's Title:

Director's Title: Other Director

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson

 State:
 TX

 ZIP Code:
 75080

 7 Full Name:
 Tara Gadgil

Officer/Director: Director
Officer's Title:

Director's Title: Other Director

Business Address: 501 W. President George Bush Highway, Suite 250

City: Richardson

State: TX ZIP Code: 75080





Page 1

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

DELAWARE, DO HEREBY CERTIFY "MEDEANALYTICS, 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 TENTH DAY OF MAY, A.D. 2019.

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

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

e at soon delaware gov/authver shi

Authentication: 202801229

Date: 05-10-19