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Tallabassee, FL32301		
City State Zip	Phone	
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CR2E031 (1-89)

#### CERTIFIED COPY OF RESOLUTION

#### CORPORATION ADOPTING A FICTITIOUS NAME FOR USE IN THE STATE OF FLORIDA

I, THE UNDERSIGNED Hugo Saksion , DO HEREBY
CERTIFY THAT THE FOLLOWING IS A TRUE, COMPLETE AND CORRECT COPY OF A
CERTAIN RESOLUTION OF THE BOARD OF DIRECTORS OF TRANSCOR INCORPORATED A
CORPORATION DULY ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF
Kentucky , WHICH RESOLUTION WAS DULY ADOPTED AT A DULY
CALLED MEETING OF THE SAID BOARD, HELD ON Tanuary 16 19 95, A
QUORUM BEING PRESENT, AND IS SET FORTH IN THE MINUTES OF THE SAID MEETING:
THAT I AM THE KEEPER OF THE CORPORATE SEAL AND OF THE MINUTES AND RECORDS
OF THIS CORPORATION; AND THAT THE SAID RESOLUTION HAS NOT BEEN RESCINDED
OR MODIFIED:
ORGANIZED AND EXISTING IN THE STATE OF Kentucky HEREBY ADOPTS THE NAME TRANSCORX INCORPORATED  FOR USE IN THE STATE OF FLORIDA FOR ALL PURPOSES; AND FURTHER RESOLVED THAT THE OFFICERS OF THE CORPORATION ARE AUTHORIZED AND DIRECTED TO TAKE ALL STEPS THAT THEY DEEM NECESSARY AND APPROPRIATE TO QUALIFY THE CORPORATION TO DO BUSINESS WITHIN THE STATE OF FLORIDA UNDER THE NAME OF TRANSCORX INCORPORATED  RESOLVED FURTHER THAT ALL ACTIVITIES AND BUSINESS OF THE CORPORATION WITHIN THE STATE OF FLORIDA SHALL BE CARRIED OUT UNDER THE NAME TRANSCORX INCORPORATED  IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY NAME AND AFFIXED
THE SEAL OF THE SAID CORPORATION, ON THIS THE DAY OF
February 19 95.
Hogo Sakson, President

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

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUB-MITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

	F FLORIDA:			
"CORPO	of corporation: must in PATION* or words or able a corporation instead of	previations of like	INCORPORATED,**	as will clearly indicate.
name at	present.)	- natarat person	or partitionally if its	t so contained in the
2. Kantu	(State or country unde	r the law of which	h it is incorporated	
o Sente	nber 17. 1992		·	
(Dat	e of Incorporation)	··	(Duratio	
5. <u>61-12</u>				
	(Federal Employ	er Identification	number, if applicabl	(0)
6. Upon_	Dualification			
(Date firs	transacted business in l	Florida. See sect	ions 60 <b>7</b> .1501, 607.1	502, and 817.155, F.S.)
7. <u>250 g</u> j	ANDVIEW AVENUE, FT. MI			<del></del> _
	(Cur	rent mailing addr	ess)	
8. PROVII	E EKG MONITORING SERVI	CE		
(Brief des	cription of the nature of	the business in w	hich it is engaged in	the state of Florida)
O Nama	and street addresses of	-86		9 5
S. IVAINES	and street addresses of	officers and or d	Irectors:	27
<u>A.                                     </u>	irectors;			J
	HUGO SAKSON		·	0 7 7 7
Address:	250 GRANDVIEW AVENUE			= 13
	FT. MITCHELL, Kentuck	y 41017		
				<b>U)</b>
Vice Chair	man;			<del></del>
Address:	<del> </del>			J U. V
•				
Director: _				
_				
Director: _		<del> </del>		
Address: _				

	ficers:						
President	11000 1317 11017			<del></del>			
Address	250 GRANDVIE						<del></del>
	FT. HITCHELL	, Kentucky 41017			<del></del>		
Vice Presid	dent						
Address							
Secretary:	HUGO SAKSON						
Address	250 GRANDVIEW	AVENUE			· · · · · · · · · · · · · · · · · · ·		<del></del>
	FT. MITCHELL,	Kentucky 41017					
Treasurer:							
Address:					<del></del>		
AUGIUSS.			· · · · · · · · · · · · · · · · · · ·				
directors.)		n an addendum to		_	amonar O	75 13 13	
	Name:	C T Corporation	_			_	. Tim
0	ffice Address:	c/o C T Corpora	tion System,	1200 South	Pine I	sland	Road
		Plantation		,Florida	33324	iC	 U)
	tered agent's				·	p Cod	
tated corpo s registere rovisions c	oration at the p d agent and ag of all statutes re	d as registered age lace designated in ree to act in this co elative to the prope it the obligations o	this application appacity. I further and complet f my position a	n, I hereby er agree to e performa s registere	accept to comply ance of need agent.	the ap with s ny dui	pointme the
Regis	tered agent's s	ignature:	C- 14/1	poration	- 4		<u></u>
		<u>G. L.</u>	Hatfield, Ass (Typed Wa	istant Sec	retary		
		(	(Typed Wa	me and Tit	tle of Off	icer)	
		ate of existence du					
		to the Department					
		e records in the ju					
3. <u>Ab</u>	rgo my	baon fr ice Chairman, or a	esident		?- <u>2</u> -	<u>95</u>	
Signature	97 Chairman, V	ice Chairmán, or a	ny officer listed	in numbe	r 9 of th	е аррі	lication)
. HUGO SA	KSON, Preside	nt					
	(Name and	capacity of person	n signing applic	cation)			



OFFICE OF THE SECRETARY OF STATE

## CERTIFICATE OF EXISTENCE DOMESTIC CORPORATION

BOB BABBAGE Secretary of State

Commonwealth of Kentucky