## F-160000003742

CI. CORBORVILION EXELE	M			
660 FAST JEFFERSON S	PREER			
Hequestor's Name "TALLANASSEE", FI. 32	301			
Address	222-1092			
City State Zip	Phone		!5(D)(D)(D) -07/24/960	\$1053-017 01053-017 ******70.00
CORPORA	TION(S) NAME		*******70.100	indexxxio.co
Med	ical Managerr	ient Scie	nces Inc.	
			,	FINF 95 HOUSIAND
-				_= 22
Profit				FILE OF CO
(() NonProfit (A) Limited Liability Co	( ) Amendme	ent	() Merger	
Foreign		n/Withdrawal	() Mark	ED STATE ORPERATIONS AMILIAS
() Limited Partnership	() Annual Ro	port	() Other	- ~~-t-
() Reinstatement	() Reservati	on	() Change of R.	A. Name Filing
() Certified Copy	() Photo Co	pies	() CUS	e riing
() Call When Ready	() Call if Pro	blem	() After 4:30:	
Walk In () Mail Out	() Will Wait		Pick Up	<b>™</b>
Name			□ □	
Availability	11124		<u></u>	
Document Examiner			22.6512.0101	72
Updater				
Verifler				
Acknowledgment				
W.P. Verifier				

CR2E031 (1-89)

## 'APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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:

1.	Hedical Hanagement Sciences, Inc. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION abbreviations of like import in language as will clearly indicate that it is a corporation instead of a ror partnership if not so contained in the name at present.)	J", oi ietur	r words al perso	<del>or</del> n
2.	Maryland 3. 52-1068115 (State or country under the law of which it is incorporated) (FEI number,	ifap	plicable	<b>)</b>
4	(Date of Incorporation)  5. Perpetual (Duration: Year corp. will cease to exist c	<u>.11</u>	petual")	<del></del>
6.	Upon Qualification (Date first transacted business in Florida, (See sections 607.1501, 607.1502, and 817.156, F.S.))	ો <sup>5</sup> ક્ટ	JISIAID Jas	,
7.	7135 Windsor Blvd., Baltimore, Maryland 21244	IL 24	FILE H OF CO	1 1 1 1 1
	(Current mailing address)	至::.2	OF STATE	<b>.</b>
	Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)  Name and street address of Florida registered agent:	<del>-</del>	<del>3</del>	
	Name: c. T Corporation System.			
	Office Address: Island Road			
	Plantation , Florida, 33324 (Zip Code)			
H	0. Registered agent acceptance: laving been named as registered agent and to accept service of process for the above stated corpor lesignated in this application. I hereby accept the appointment as registered agent and agree to act urther agree to comply with the provisions of all statutes relative to the proper and complete performent I am familiar with and accept the obligation of my position as registered agent.	ın tn	us capa	City. I
_	Maulyn Appi			
	(Registered agent's signature) (Officer)		-	•
	Marilyn Lizzio - Assistant Secretary			

(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

12. Names and ac	idresses of	officers	and/or	directo	rs
------------------	-------------	----------	--------	---------	----

A.	DIRECTORS	
	Chairman:	
	Address:	
	Vice Chairman:	
	Address:	
	Director:	
	Address:	ી <u>9</u> 6
	Director:	96 JUL 24
	Address:	AKII: 42
В.	OFFICERS	2
	President: William DeZonia	
	Address: 7135 Windsor Blvd.  Baltimore, Maryland 21244	
	Vice President: Steve Forthuber	
	Address: 7135 Windsor Blvd.	•
	Baltimore, Maryland 21244	
	Secretary:	
	Address:	

	Treasurer:
	Address:
	NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
Ś	13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
	14, William DeZonia. Promident  (Typed or printed name and capacity of person signing application)

SECRETARY OF STATE SECRETARY OF CORPORATIONS
96 JUL 24 AM II: 42

## STATE OF MARYLAND

446221

## STATE DEPARTMENT OF ASSESSMENTS AND TAXATION

301 West Preston Street Baltimore, Maryland 21201

I, BRENDA A. WALKER OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HERBY CERTIFY THAT SAID DEPARTMENT, BY THE LAWS OF SAID STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATE CHARTERS, OR OF CUMPORATIONS TO TRANSACT BUSINESS IN THIS STATE; AND I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT MEDICAL MANAGEMENT SCIENCES, INC.
IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF
THE LAWS OF MARYLAND AND SAID CORPORATION HAS FILED ALL
ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON
THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS
AT\_IHE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT
AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER
OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN THE STATE
OF MARYLAND.

SECRETARY OF STATE ON VISION OF CORPORATIONS



IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE THIS 18TH DAY OF JUNE, 1996.

BRENDA A. WALKER ADMIN SPECIALIST II

AT5-031