F97000006419

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TALLAHASSEE, FLORIDA

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COVER LETTER

Division of Corporations	
SUBJECT: CONSONA ERP INC.	
(Nar	ne of Corporation)
DOCUMENT NUMBER: F97000006419	9
The enclosed Amendment and fee are sul	bmitted for filing.
Please return all correspondence concern	ing this matter to the following:
JISOOK SONG (Name of Contact Person))
CONSONA CORPORATION (Firm/Company)	
450 E. 96TH. STREET, SUITE 300 (Address)	
INDIANAPOLIS, IN 46240	
(City/State and Zip Code	2)
For further information concerning this n	natter, please call:
JISOOK SONG (Name of Contact Person)	at (317) 249-1307 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
\$35.00 Filing Fee \$43.75 Filing Fee Certificate of St	se & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

2661 Executive Center Circle Tallahassee, FL 32301

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

(1-	SECTION I 3 MUST BE COMPLETED)	
F97000006419		_
(Docume)	nt number of corporation (if known)	1
] CONSONA ERP INC.	SECTION I 3 MUST BE COMPLETED) Int number of corporation (if known) It appears on the records of the Department of State)	Mark State
(Name of corporation as i	t appears on the records of the Department of State)	_
2. INDIANA	3, 12/05/1997	
(Incorporated under laws of)	3. 12/05/1997 (Date authorized to do business in Florida)	
(4-7 COMPLET	SECTION II TE ONLY THE APPLICABLE CHANGES)	
4. If the amendment changes the name of the co	orporation, when was the change effected under the laws of	
its jurisdiction of incorporation? 12/31/2010		
CONSONA CORPORATION		
(Name of corporation after the amendment, a appropriate abbreviation, if not contained in	adding suffix "corporation," "company," or "incorporated," or new name of the corporation)	
(If new name is unavailable in Florida, enter a business in Florida)	alternate corporate name adopted for the purpose of transacting	_
6. If the amendment changes the period of dura	tion, indicate new period of duration.	
	(New duration)	
7. If the amendment changes the jurisdiction of	incorporation, indicate new jurisdiction.	
	(New jurisdiction)	
 Attached is a certificate or document of simil 90 days prior to delivery of the application to having custody of corporate records in the jun 	lar import, evidencing the amendment, authenticated not more the Department of State, by the Secretary of State or other offic risdiction under the laws of which it is incorporated.	ar ia
- Dy Mit		
(Signature of a director, president or other offi of a receiver or other court appointed fiduciar	icer - if in the hands	
DON MELTON	ASSISTANT SECRETARY	

(Title of person signing)

(Typed or printed name of person signing)

State of Indiana Office of the Secretary of State

CERTIFICATE OF MERGER

of

CONSONA ERP, INC.

I, TODD ROKITA, Secretary of State of Indiana, hereby certify that Articles of Merger of the above For-Profit Domestic Corporation have been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

The following non-surviving entity(s):

CIMNET SYSTEMS, INC.

a(n) Illinois For-Profit Foreign Corporation qualified in Indiana

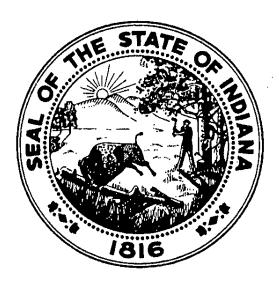
merged with and into the surviving entity:

CONSONA ERP, INC.

The name following said transaction will be:

CONSONA CORPORATION

NOW, THEREFORE, with this document I certify that said transaction will become effective Friday, December 31, 2010.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 29, 2010.

TODD ROKITA, SECRETARY OF STATE