C T CORPORATION SYSTEM		•
660 East Jefferson Stree	et	
Requestor's Name	•	
Tallahassee, Florida 323	01	
Address (850) 222–1092		400000cooox x
City State Zip	Phone	4000025882644 -07/14/9801051014 ******70.00 ******70.00
CORPORAT	TION(S) NAME	*****70.00 ******70.00
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7.5.1	**************************************	
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Profit		高 意
()NonProfit ()Limited Liability Comp	() Amendment	() Merger 35
Foreign	() Dissolution/Wi	thdrawal () Mark
() Limited Partnership	() Annual Report	() Other
() Reinstatement	() Fict. Filing	
() <u>Limited Liability Part</u> () Certified Copy	mership () Photo Copies	() UCC-1 UCC-3 (2)
() Certified Copy	() Photo Copies	() CUS
() Call When Ready	() Call if Problem	
Walk In	() Will Wait	Pick Up $\omega = 7/m$
() Mail Out		719
Name Availability		Please Return Extra Copy(s) Filed Stamp
Document	Hu .	Thanks Malania
Examiner	JUL 14 1998	Thanks, Melanie
Updater	• ·	•
Verifier	· 	
Acknowledgment		•
W.P. Verifier		

CR2E031 (1-89)

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:

	Midlands Injury Management, Inc. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)	
	Oklahoma (State or country under the law of which it is incorporated) 3. 73-1536804 (FEI number, if applicable)	
4.	February 18, 1998 5. Perpetual (Date of incorporation) (Duration: Year com. will cease to exist or "pemetual")	
6.	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")	
	P.O. Box 268912, Oklahoma City, Oklahoma 73126 (Current mailing address) (Current mailing address)	
1	Please see the attached (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	
9.	Name and street address of Florida registered agent:	
	Name: <u>c T Corporation System</u> c/o C T Corporation System, 1200 South Pine Office Address: Island Road Plantation , Florida, 33324	
10	(Zip Code)	

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 obligation of my position as registered agent.

C T Corporation System

John J. Linnihan-Asst. Vice President

(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

- 11. 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.
- 12. Names and addresses of officers and/or directors:

	Chairmar	See attached list of directors
	Address:	
	Vice Chai	rman: <u>See attached list of directors</u>
	Address:_	
	Director: ¸	See attached list of directors
	Director:_	
В.	OFFICERS	
	President:	See attached list of officers
	Address:	
	Vice Presi	dent:
	Address:	
	- Secretary:	
	_	

SECRETARY OF STATE

A.

DIRECTORS

i reasurer:	
Address:	
13. Olympia	ou may attach an addendum to the application listing additional officers an, Vice Chairman, or any officer listed in number 12 of the
14. Charles C. Caldwei (Typed or printed na	1. President The and capacity of person signing application)

98 JUL 14 AM 11: 13

CHARGING LAND STATE

98 JUL 14 MIII: 13

FEIN: 73-1536804 DATE OF INCORPORATION: 2/18/98

OFFICERS AND DIRECTORS

NAME	TITLE/SSN	BUSINESS ADDRESS & PHONE	RESIDENCE ADDRESS
Charles C. Caldwell	President & Director 448-36-0494	3503 N.W. 63rd Street, Stc. 305 Oklahoma City, OK 73116 (405) 840-0074	6200 Inland Road Oklahoma City, OK 73132
J. Mark Davis	Vice President 444-62-7514	3503 N W. 63rd Street, Ste. 305 Oklahoma City, OK 73116 (405) 840-0074	P.O Box 607 Pledmont, OK 73078
Dannıs J. Ottis	Treasurer 444-68-7617	3503 N.W. 63rd Street, Ste. 305 Oklahoma City, OK 73116 (405) 840-0074	2613 Clover Glen Drive Edmond, OK 73013
Robin L. Green	Secretary 448-76-0373	3503 N W. 63rd Street, Ste 305 Oklahoma City, OK 73116 (405) 840-0074	11308 Ashford Drive Yukon, OK 73099

SPECIFIC CORPORATE PURPOSE OF MIDLANDS INJURY MANAGEMENT, INC.

- (a) To provide medical case management services to insurance companies, administrators and managing general agents engaged in the administration of accident and health, property, casualty, surety, fire, marine and vehicle insurance; to apply for, acquire, and hold all licenses, permits, and franchises necessary or useful in the pursuit of said purposes.
- (b) It shall have all powers granted to a domestic Corporation by the "Oklahoma General Corporation Act," Okla. Stat. tit. 18, §1001 Supp. 1986, et. seq., and may engage in all activities reasonably necessary in and incidental to the furtherance of its said corporate purposes, not otherwise prohibited by the "Oklahoma Insurance Code," Title 36, Oklahoma Statutes (1996).

SECRETARY OF STATE

