

Document Number Only  
**F980000004985**

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name  
TALLAHASSEE, FL 32301

Address  
222-1092

City State Zip Phone

CORPORATION(S) NAME

400002631214--6  
-09/02/98--01045--020  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

*American Medical Information Association, Inc.*

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|--|---|---|
| <input type="checkbox"/> Profit                | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input checked="" type="checkbox"/> NonProfit  |   |   |
| <input type="checkbox"/> Limited Liability Co. | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
| <input checked="" type="checkbox"/> Foreign    |   |   |
| <input type="checkbox"/> Limited Partnership   | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Reinstatement         | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of R.A.     |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy        | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready       | <input type="checkbox"/> Call if Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In    | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out              |   |   |

*mtm*  
*9/2*

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

SEP 02 1998

Thanks,  
Jeff

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DIVISION OF CORPORATION

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR  
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. American Medical Informatics Association, Inc.

(Name of corporation: must include the word "INCORPORATED" or "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.)

2. District of Columbia

(State or country under the laws of which it is incorporated)

3. 11/3/88

(Date of Incorporation)

4. Perpetual

(Duration)

5. 52-1615853

(Federal Employer Identification number, if applicable)

6. upon qualification

(Date corporation first conducted affairs in Florida. See sections 617.1501, 617.1502, and 817.155, F.S.)

7. 4925 St. Elmo Ave., #401, Bethesda, MD 20814

(Current mailing address)

8. Purposes of a conference

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Names and addresses of officers and/or directors:

**A. Directors:**

Chairman: Paul D. Clayton, Ph. D.

Address: 161 Fort Washington Ave., AP 1310

New York, NY 10032-3784

Vice Chairman: Reed Gardner, Ph. D.

Address: 325 8th Ave.

Salt Lake City, UT 84143

Executive Director-Officer: Dennis Reynolds

Address: 4925 St. Elmo Ave., #401

Bethesda, MD 20814

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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**B. Officers:**

President: Paul D. Clayton, Ph.D.

Address: 161 Fort Washington Ave., AP 1310  
New York, NY. 10032-3784

Vice President: Reed M. Gardner, Ph.D.

Address: 325 8th Ave.  
Salt Lake City, UT 84143

Secretary: James J. Cimino, M.D.

Address: 1610 Fort Washington Ave.  
New York, NY. 10032

Treasurer: William Hammond, Ph.D.

Address: Box 2914, DUMC  
Durham, NC 27710

(If needed, you may attach an addendum to the application listing additional officers and directors.)

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**10. Name and Street address of Florida registered agent:**

Name: C T CORPORATION SYSTEM

Office Address: c/o C T CORPORATION SYSTEM, 1200 S. Pine Island Rd.,  
Plantation, Florida 33324  
Zip Code

**11. 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: Alex Hamilton  
Alex Hamilton  
Assistant Secretary  
(Title)

12. 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.

13. Dennis Reynolds  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Dennis Reynolds - Executive Director  
(Typed or printed name and capacity of person signing application)

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS  
BUSINESS REGULATION ADMINISTRATION



**C E R T I F I C A T E**

**THIS IS TO CERTIFY** that there were received and accepted for record in the Department of Consumer and Regulatory Affairs, Corporations Division, on the **3RD** day of **NOVEMBER, 1988**, Articles of Incorporation of:

**AMERICAN MEDICAL INFORMATICS ASSOCIATION, INC.**

The above named corporation is duly incorporated and existing pursuant to and by virtue of the Nonprofit Corporation Act of the District of Columbia and authorized to conduct its affairs in the District of Columbia as of the date mentioned above.

**WE FURTHER CERTIFY** that the above entitled corporation is at the time of issuance of this certificate in Good Standing, according to the records of the Corporations Division, having filed all annual reports required by the District of Columbia Nonprofit Corporation Act.

**IN TESTIMONY WHEREOF** I have hereunto set my hand and caused the seal of this office to be affixed this **31ST** day of **AUGUST, 1998**

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Lloyd J. Jordan  
Director

Patricia A. Montgomery  
Administrator  
Business Regulation Administration

  
Robert D. Henry  
Act. Asst. Corporate Program Manager  
Corporations Division

Marion Barry, Jr.  
Mayor