

F98000007130



ACCOUNT NO. : 072100000032

REFERENCE : 083575 4814233

AUTHORIZATION : *Patricia Pyjunt*

COST LIMIT : \$ 70.00

ORDER DATE : December 30, 1998

ORDER TIME : 10:05 AM

ORDER NO. : 083575-030

900002727699--8

CUSTOMER NO: 4814233

CUSTOMER: Ms. Gwen Barton
Morris Manning & Martin
Suite 1600
3343 Peachtree St, Northeast
Atlanta, GA 30326

FOREIGN FILINGS

NAME: INFOCURE SYSTEMS, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

SECRET 31 JAN 49

98 DEC 31 PM 12:04

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

mt

12/31

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:

1. InfoCure Systems, 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.)

2. Georgia 3. 58-2359731
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/10/97 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 12/31/98
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. c/o InfoCure Corporaton
1765 The Exchange, Suite 450
Atlanta, GA 30339
(Current mailing address)

8. _____
(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: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida, 32301
(Zip Code)

10. 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.

Corporation Service Company
By: Maurice Cullen
(Registered agent's signature)

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.

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12. Names and addresses of officers and/or directors: (Street address **ONLY**- P. O. Box **NOT** acceptable)

A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Frederick L. Fine

Address: 1765 The Exchange, Suite 450

Atlanta, GA 30339

Director: James K. Price

Address: 1765 The Exchange, Suite 450

Atlanta, GA 30339

B. OFFICERS (Street address only- P. O. Box NOT acceptable)

President: Frederick L. Fine

Address: 1765 The Exchange, Suite 450

Atlanta, GA 30339

Vice President: _____

Address: _____

Secretary: James K. Price

Address: 1765 The Exchange, Suite 450

Atlanta, GA 30339

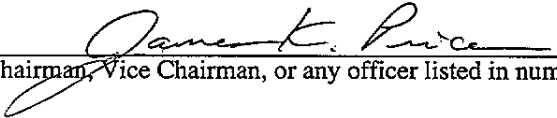
CFO

Treasurer: Richard E. Perlman

Address: 1765 The Exchange, Suite 450

Atlanta, GA 30339

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. James K. Price, Secretary
(Typed or printed name and capacity of person signing application)

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**Secretary of State
Corporations Division
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530**

DOCKET NUMBER : 983570330
CONTROL NUMBER : 9743839
DATE INC/AUTH/FILED : 12/10/1997
JURISDICTION : GEORGIA
PRINT DATE : 12/23/1998
FORM NUMBER : 211

GWENDOLYN D. BARTON/MORRIS, MANNING
1600 ATLANTA FINANCIAL CENTER
3343 PEACHTREE ROAD, N.E.
ATLANTA, GA 303261044

CERTIFICATE OF EXISTENCE

I, Lewis A. Massey, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**INFOCURE SYSTEMS, INC.
A DOMESTIC PROFIT CORPORATION**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Lewis A. Massey

Lewis A. Massey
Secretary of State

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