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/ State Zip	Phone				
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#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 29, 1999

CT CORPORATION SYSTEM 660 EAST JEFFERSON ST. TALLAHASSEE, FL 32301

SUBJECT: INTEGRATED CLINICAL DATA, INC.

Ref. Number: W99000002363

We have received your document for INTEGRATED CLINICAL DATA, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Based upon information provided by the Florida Department of Revenue, pursuant to section 213.053(14), Florida Statutes, it appears that INTEGRATED CLINICAL DATA, INC. has transacted business in Florida prior to submitting an "Application for Authority to Transact Business in Florida". Please contact this office concerning the date first transacted business in Florida.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$3465.00.

If it is determined that the corporation's previous activities in Florida that warranted compliance with Florida's revenue laws did not constitute the transaction of business within the meaning of s. 607.1501, F.S., please provide a sworn affidavit to that effect.

If you have any questions concerning the filing of your document, please call (850) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 799A00004108

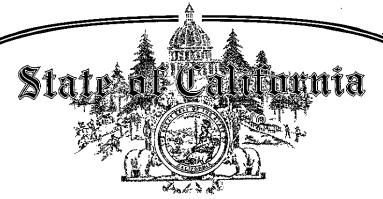
Walk-In Prck-Up 2/12/99 E DIVISION OF CORPORATION
E 99 FECTIVE OR

### 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.	INTEGRATED CLINICAL DATA	A, INC.					
	(Name of corporation: the word "INCORPORATED," "COMPANY," 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 pa	artnership if not so o	contain	ed in the nar	ne at pre	sent.)	
2.	CALIFORNIA						
	(State or country	under the law of w	hich it	is incorporat	ed)		
3.	October 3, 1984		4	PERPETUA	L		
	Date of Incorporati	ion)		(	Duration)		
5.	94-2946241					j.	
	(Federal Emplo	yer Identification Nu	ımber,	if applicable	)		
6.	UPON FILING						
(Da	te first transacted business in Fio	rida. See Sections (	607.15	501, 607.150	02,₋and 8	17.155	, F.S.)
7.	1001 GALAXY WAY, SUITE 2	208, CONCORD, CA	9452	20		w.	O
		(Current mailing add	lress)			ſ6	SEC
8.	To engage in any lawful busine	see in which a corno	ration	may annana	under Eld	rida lav	・ ・ ごごっ
0.	(Corporate purpose and n						3
^	Name and Church address of Flor		£.			PM	걸유
9.	Name and Street address of Flor	nda registered agem	L.		. =	5.	
	Name:	CT CORPORATION				80	
	Office Address:	1200 S. PINE ISLA	AND R		2224		
		PLANTATION		, Florida	33324	Zip Co	de
						<b>—</b> .p • •	
10.	Registered agent's acceptance:				<del></del>		
	Having been named as registere	d agent and to acce	ept ser	vice of proce	ss for the	above	stated
	corporation at the place design	ated in this applica	tion, I	hereby acce	ept the ap	pointm	ent as
	registered agent and agree to act						
	of all statutes relative to the pro				luties, an	d I am f	amiliar
	with and accept the obligations	of my position as re	egister	ed agent.			
				CONVIE	BRYAN	A COLUMN TO THE PERSON NAMED IN COLU	hat Amb B
	Registered agent's signature: _	Conice	Bux	_ SPECIAL A	SSISTANT	SECRET	THA.
11.	Attached is a certificate of existe	ence duly authentica	ted. no	ot more than	90 davs n	rior to d	eliverv
	of this application to the Departr	nent of State, by the	e Secre	etary of State	or_other	official	having
	austadic of corporate records in	the juriediction under	or the	law of which	it ie inco	rnorate	4

12. Names	s and addresses of officers and or directors:		
A. Directo	ors:		
<u>,,,,,</u>		- <u></u> -	-
Chairman:	RONALD GALOWICH	<u> </u>	
ADDRESS:	200 W, MADISON STREET, SUITE 2800	<del>-</del> .	
	CHICAGO, IL 60606		
Vice Chairn	nan:		
Address:			
Director:	JAMES BODENBENDER		
	200 W. MADISON STREET, SUITE 2800	_	
Addicoo.	CHICAGO, IL 60606	<b>-</b>	
	<u> </u>	<u></u>	
Director:	JEFFREY A. GALOWICH	_=	
Address:	200 W. MADISON STREET, 2800		
Address.	CHICAGO, IL 60606		
	CHICAGO, IL COSCO		
B. Office	are.		
b. Office	<del>33</del> .	<del></del>	
President:	JAMES BODENBENDER	<del>-</del>	
Address:	200 W, MADISON STREET, SUITE 2800		
	CHICAGO, IL 60606		<u></u>
			AN CONTRACTOR
Ex-Vice Pre	esident: <u>JEFFREY A. GALOWICH</u>		<u> </u>
Address:	200 W. MADISON STREET, SUITE 2800	· · · · · · · · · · · · · · · · · · ·	9 7 <u>7</u>
	CHICAGO, IL 60606	<u>-</u>	고 그ㅁ
		•	\$
Secretary:	JEFFREY A. GALOWICH		
Address:	200 W. MADISON STREET, SUITE 2800		<u></u>
	CHICAGO, IL 60606		
		-	
Treasurer:	JEFFREY A, GALOWICH	=	
Address:	200 W. MADISON STREET, SUITE 2800	·	
,	CHICAGO, IL 60606		
(If needed.	you may attach an addendum to the application listing additional of	fficers and	i/or directors
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Conaceant Salveil Charman		
13	enallant farmer craimer	. 4 O - 5 + b-	
(Sign	ature of Chairman, Vice Chairman, or any officer listed in number	T LZ OT THE	application)
4.4	RONALD GALOWICH, Chairman	-	<u> </u>
14	(Name and capacity of person signing application)	West of the second	



#### SECRETARY OF STATE

## CERTIFICATE OF STATUS DOMESTIC CORPORATION

I, BILL JONES, Secretary of State of the State of California, hereby certify:

That on the \_\_\_\_\_ 3rd \_\_\_\_ day of \_\_\_\_\_ October \_\_\_\_\_, 19 84

#### INTEGRATED CLINICAL DATA

became incorporated under the laws of the State of California by filing its Articles of Incorporation in this office; and

That no record exists in this office of a certificate of dissolution of said corporation nor of a court order declaring dissolution thereof, nor of a merger or consolidation which terminated its existence; and

That said corporation's corporate powers, rights and privileges are not suspended on the records of this office; and

That according to the records of this office, the said corporation is authorized to exercise all its corporate powers, rights and privileges and is in good legal standing in the State of California; and

That no information is available in this office on the financial condition, business activity or practices of this corporation.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of
January 28, 1999

Billyons

Secretary of State