

Document only

CT Corporation System  
660 East Jefferson Street  
Tallahassee, FL 32301  
Tel 850 222 1092  
Fax 850 222 7615  
Attn: Jeff Netherton

CORPORATION(S) NAME

eMedicine.com, Inc.

☒ Profit  
☐ Nonprofit

☒ Foreign

☐ Limited Partnership  
☐ LLC

☐ Certified Copy

☐ Call When Ready  
☒ Walk In  
☐ Mail Out

☐ Amendment

☐ Dissolution/Withdrawal  
☐ Reinstatement

☐ Annual Report  
☐ Name Registration  
☐ Fictitious Name

☐ Photocopies

☐ Call If Problem  
☐ Will Wait

☐ Merger

☐ Mark

☐ Other  
☐ Change of RA  
☐ UCC

☐ CUS

☐ After 4:30  
☒ Pick Up

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
Acknowledgement \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

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89 SEP 24 AM 10:42

RECEIVED  
99 SEP 24 PM 4:10  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

BK 9/24/99

# 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. eMedicine.com, 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. Delaware

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

3. Applied for

(FEI number, if applicable)

4. August 9, 1999

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. Suite C, 875 Pasadena Avenue South, St. Petersburg, Florida 33707

(Current mailing address)

8. To engage in any lawful act or activity for which corporations may be organized under the laws of the State of Florida  
(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: Dr. Scott H. Plantz

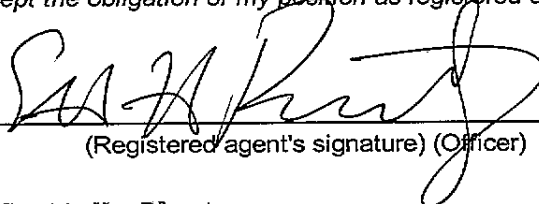
Office Address: Suite C, 875 Pasadena Avenue South

St. Petersburg, Florida, 33707

(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

  
(Registered agent's signature) (Officer)

Dr. Scott H. Plantz

(Type Name and Title of Officer)

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:

A. DIRECTORS

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

Director: see attached list of directors

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

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

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

B. OFFICERS

President: see attached list of officers

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

Vice President: \_\_\_\_\_

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

Secretary: \_\_\_\_\_

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

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Treasurer: \_\_\_\_\_

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

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. Scott H. Plantz, Chief Executive Officer

(Typed or printed name and capacity of person signing application)

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Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Directors of  
eMedicine.com, Inc.**

- 
1. Scott H. Plantz  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  2. Jonathan Adler  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  3. Jeff Berezin  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707

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Appendix to Florida  
Application by Fgn. Corp. for Authorization to Transact Business in Florida

**Officers of  
eMedicine.com, Inc.**

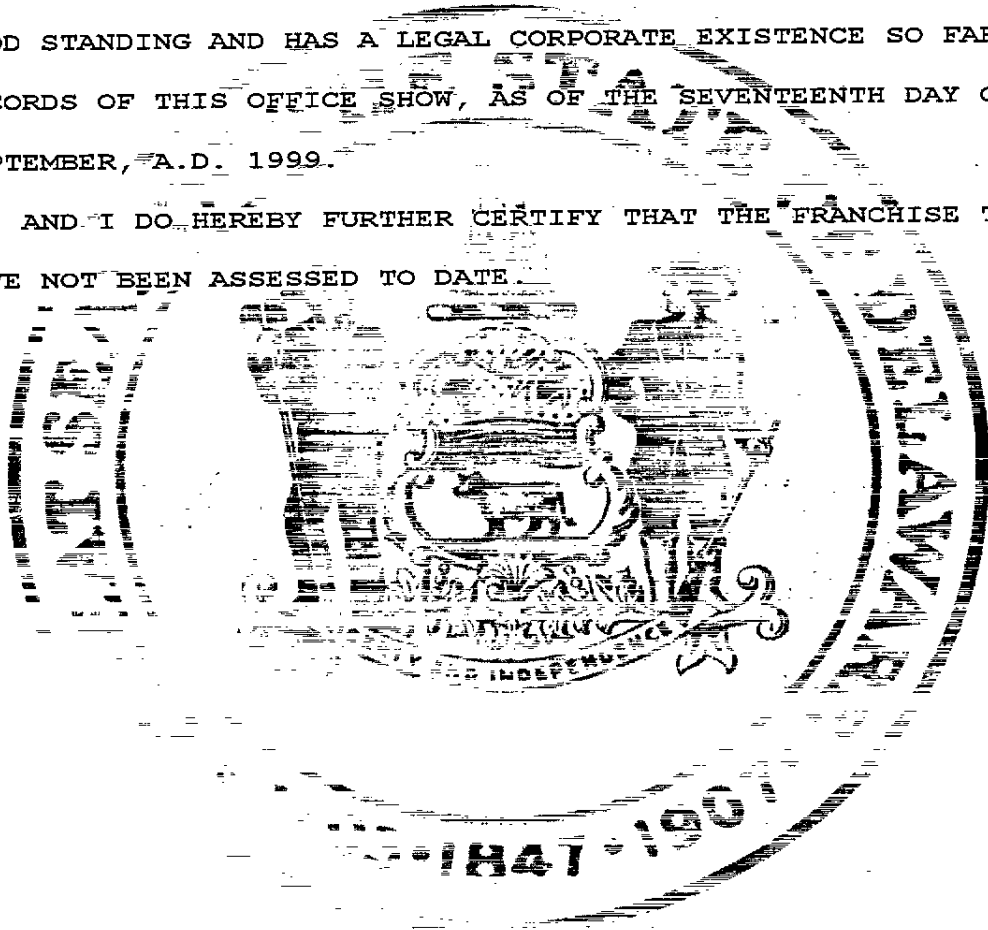
- 
1. Scott H. Plantz, Chief Executive Officer  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  2. Jonathan Adler, Prés. & Chief Medical Officer  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  3. Jeff Berezin, Vice President  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  4. Elise Adler, Treasurer & CFO  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  5. Joseph R. Vandenack, Secretary  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707
  6. Laura Parish, Assistant Secretary  
Suite C, 875 Pasadena Avenue South  
St. Petersburg, Florida 33707

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMEDICINE.COM, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.



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DIVISION OF CORPORATIONS  
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*Edward J. Freel*  
Edward J. Freel, Secretary of State

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AUTHENTICATION:

DATE:

09-17-99