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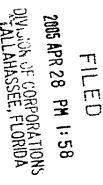
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April 27, 2005

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Didec W. Zucienci

Licensed also in Missouri

Florida Department of State Registration Section Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: Medappz, LLC

Dear Sir/Madam:

FEDERAL EXPRESS



Enclosed are two originally signed documents styled Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida. Attached to each of these two documents is the Certificate of Designation of Registered Agent. Also enclosed is an original certificate of existence from the state of Kansas dated April 22, 2005.

We have included a check for \$155, which includes the \$100 filing fee, the \$25 Designation of Registered Agent fee and a certified copy fee of \$30. Please return all correspondence to the individual listed on the enclosed Transmittal Letter.

Should anything further be required for the filing, please call us collect. Thank you kindly for your attention to this matter.

Very truly yours,

Sharon K. Kincaid, CLA Certified Legal Assistant

Sharon K Kincard

SKK/pjb Enclosures

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Medappz, LLC		
	(Name of Limited Liability (	Company)
	e, and check are submitted to reg	y for Authorization to Transact Business in ister the above referenced foreign limited
Please return all correspondence	concerning this matter to the fol	TILE D.  PALLAHASSEE, FLORIDA
Gr	egory B. Klenda	54 R2
Pathons	(Name of Person)	SSEE, F
Klenda, Mitchell, Auste	erman & Zuercher, L.L.C.	
	(Firm/Company)	ONS OA
1600 Epic Center, 301	North Main Street (Address)	
Wichita, Kansa	s 67202	
	(City/State and Zip Co	ode)
For further information concerni	ng this matter, please call:	
Gregory B. Klenda	at (316	267-0331
(Name of		de & Daytime Telephone Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327
Tallahassee, Florida 3239	19 Talla	hassee, Florida 32314
Enclosed is a check for the follo	wing amount:	
□ \$125.00 Filing Fee □ 5	\$130.00 Filing Fee & \$155.00 Fi	ling Fee & \$\supersquare\$ \$160.00 \text{ Filing Fee, Certificate}\$  certified Copy of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of Foreign Limited	Lial	bility Company)		7085
Kansas		3	42-1590583		
	law of which foreign limited liability	٠.		per, if applicable	54R26
May 5, 2003		<b>-5</b> -	perpetual	Ű	48
	Organization)	٠.	(Duration: Year limited exist or "perpetual")	l liability company w	Il cease t
					智言
	(Date first transacted business in I (See sections 608.501 & 608.502 F.	Florid S. to	da, if prior to registration determine penalty liabil	.) ity)	73
245 North Waco, St	ite 228, Wichita, Kansas 67202				
	(Ctuant A J.J.	<del>-</del>	Principal Office)		
	(Sireet Addres	92 OT	rinicipal Office)		
If limited liability	company is a manager-manage	d co	ompany, check here	7	
•				_	
The name and usu	al business addresses of the ma	nag	ing members or man	agers are as follov	vs:
Steven I. Zielke M	.D., 223 South Hillside, Wichita, K	(ane	as 67211		
Oteven L. Zieike, iv	.b., 220 Goder Finiside, Wichita, I	COI 13			
Brian J. Lichtlin, 24	5 North Waco, Suite 228, Wichita	, Kai	nsas 67202		
			<u>.</u>		
_	certificate of existence, no more than 9	•	• •		_
-	tw of which it is organized. (A photoco under oath of the translator must be su		_	incate is in a toreign i	anguage, a
ISIAHOR OF THE CAUTICAN	curice can of the translator must be su	CHILIL	a.)		
. Nature of busines	ss or purposes to be conducted	or p	romoted in Florida:	software developme	ent,
		г	,		
licensing and sales					
	A HA				
	To Julio			<del></del>	
	Signature of a member or an a				
	Signature of a member or an a (In accordance with section 608.408(3), an affirmation under the penalties of pe	F.S.,	the execution of this docum	nent constitutes	

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
Medappz, LLC	是复为力
2. The name and the Florida street address of the registered agent and office are:	28 PH
Jane M. Lichtlin	最高
(Name)	S8 ORIDAS
3350 NW Boca Raton Boulevard, Suite A30	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	_
Boca Raton, Florida 33431 FL	_
City/State/Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Jane M. Lichtlin

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

### STATE OF KANSAS

OFFICE OF
SECRETARY OF STATE
RON THORNBURGH



## To all to whom these presents shall come, Greetings:

I, RON THORNBURGH, Secretary of State of the State of Kansas, do hereby certify that I am the custodian of records of the State of Kansas relating to limited liability companies and that I am the proper official to execute this certificate.

I FURTHER CERTIFY THAT

MEDAPPZ, LLC

is a regularly and properly organized limited liability company under the laws of the State of Kansas, having filed articles of organization in Kansas on the 5th day of May, A.D. 2003 and has paid all fees due this office and is in good standing according to the records now on file in the office of Secretary of State.



In testimony whereof:
I hereto set my hand and cause
to be affixed my official seal.
Done at the City of Topeka, this
22nd day of April, A.D. 2005

RON THORNBURGH SECRETARY OF STATE