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#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

#### **BUSINESS CORPORATION**

#### **APPLICATION FOR CERTIFICATE OF AUTHORITY**

orpor	ant to the provisions of Section ation hereby applies for a Cellowing statement;	on 7-1.2-1405 of the General La rtificate of Authority to transact b	aws of Rhode Island, 1956, as amended, business in the State of Rhode Island, and t	the undersigned foreign for that purpose submits				
. The	name of the corporation is	Claimetrics Servic	es, Inc.					
. It is	incorporated under the laws of	Oklahom <b>a</b>	0klahom <b>e</b>					
The	е пате, if different, which it elects to use in Rhode Island is:							
(a	) If the name of the corpo "incorporated," or "limited," above corporate endings fo	or an abbreviation thereof, the	orporation does not contain the word "c on list the name of the corporation with the	orporation," "company," e addition of one of the				
(b	) If the corporate name is no qualify and transact busine application:	t available in Rhode Island, ther ess in Rhode Island as stated	n set forth below the fictitious name under w in the "Fictitious Business Name Stateme	hich the corporation will nt" to be filed with this				
The	date of its incorporation is	6-14-2007	and the period of its duration is Perp	etual				
The	address of its principal office	in the state or country under the	laws of which it is incorporated is					
	250 NW Expressway,		City, OK 73132					
The	address of its proposed regis	stered office in Rhode Island is	10 Weybosset Street					
	D '1	00000	(Street Address, <u>not</u> P.	O. Box)				
	Providence (City/Town)	, RI 02903 (Zip Code)	and the name of its proposed registered a	agent in Rhode Island at				
tha	t address is	С	T Corporation System					
			e of Agent)	e-7 :				
The	purpose or purposes which it SEE ATTACHED	proposes to pursue in the trans-	action of business in Rhode Island are:	-3				
			7-0-1-0-1-0-1					
(a)	The names and respective ad	dresses of its directors (optional	unless directors are required under the law	s of the sta <del>te</del> or country				
1	of which it is incorporated).			ž., <i>(i)</i>				
		<u>Name</u>	<u>Address</u>	11:10				
		ATTACHED		The state of the s				
	Director			ILED				
	Director			T 1 2 2007				
	Director		UU	1 1 at tour				
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Form No. 150 Revised: 12/05 R1039 - 06/20/2006 C T System Online

	_		SEE ATTACE	<u>Name</u> HED		<u>Address</u>
		resident ice President				
		reasurer				
	S	ecretary				
9.	The	e aggregate num d series, if any, v	nber of shares w vithin a class, is:	hich it has authority to is	ssue, itemized by classes, p	par value of shares, shares without par value,
	_	500 Number of	Shares	<u>Class</u> Common Stock	<u>Series</u>	Par Value or Statement that Shares are without Par Value \$1.00
10.	(a)	An estimate of	of the value of	all property to be own	ed by the corporation for	the following year, wherever located, is
	(b)	An estimate o	f the value of	the corporation's prope	rty to be located within F	Rhode Island during the following year is
	(c)	located Mithill fi	nis state during t	ne following year bears	to the value of all property.	alue of the property of the corporation to be of the corporation to be owned during the ultiply by 100 to obtain the percentage].
11.	(a)	An estimate o \$1,000.0	f the gross am	ount of business to be	e transacted by the corp	poration during the following year is
	(b)	An estimate of Island during the	f the gross am ne following year	ount of business to be is \$ 500.00	transacted by the corporation	on at or from places of business in Rhode
	(c)	corporation at a	y the corporation	- Dusiness in this state a	HEIRO THE TOHOWARD VOOR BO	nount of business to be transacted by the ars to the gross amount thereof which will ide (b) by (a) and multiply by 100 to obtain
12.	This of w	application is a hich it is incorpo	ccompanied by a rated.	a certificate of Good Sta	nding issued by the proper	officer of the state or country under the laws
13.	This than	Application for 0 the 90 <sup>th</sup> day afte	Certificate of Aut er the date of thi	hority shall be effective s filing	upon filing unless a specifi	ed date is provided which shall be no later
Dat	0.	9-4-9	<b>V</b> 1	e a	xamined this Applicatior	y, I declare and affirm that I have n for Certificate of Authority, including achments, and that all statements and correct.
uat	e: _		<i>/</i>	_ <del>_</del>	Signature of Auth	orized Officer of the Corporation
						cretary/General Counsel)
				_	Type or Print I	Name of Authorized Officer

## CLAIMETRICS SERVICES, INC. An Oklahoma corporation

#### **PURPOSE CLAUSE**

The nature of the business and the purpose of the company shall be to act as agent, adjuster and third party administrator for insurance companies and employers in the service of accident and health, property, casualty, workers' compensation, surety, fire, marine, vehicle and any and all other lines of insurance; to apply for, acquire, and hold all licenses, permits, and franchises necessary or useful in the pursuit of said purposes and to engage in all activities reasonably necessary in and incidental to the furtherance of its said purposes not otherwise prohibited by law.

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#### CLAIMETRICS SERVICES, INC. An Oklahoma Corporation Date of Formation: June 14, 2007 FEIN: 26-0448877

PPB:

7250 Northwest Expressway, Suite 100 Oklahoma City, OK 73132

> Mailing Address: P.O. Box 22475 Oklahoma City, OK 73123

#### **BOARD OF DIRECTORS:**

Marshall Snipes 3417 Partridge Road Oklahoma City, OK 73120

Barry D. Bloom 385 Chestnut Street San Carlos, CA 94070

**Thomas N. Richards** 5812 Country Club Drive Edmond, OK 73003

### CLAIMETRICS SERVICES, INC. An Oklahoma Corporation Date of Formation: June 14, 2007

FEIN: 26-0448877

#### PPB:

7250 Northwest Expressway, Suite 100 Oklahoma City, OK 73132

> **Mailing Address:** P.O. Box 22475 Oklahoma City, OK 73123

#### **OFFICERS:**

#### **Marshall Snipes**

CEO 3417 Partridge Road Oklahoma City, OK 73120

#### Barry D. Bloom

President 385 Chestnut Street San Carlos, CA 94070

#### Thomas N. Richards

**CFO** 5812 Country Club Drive Edmond, OK 73003

#### Debbie L. Self

Secretary/General Counsel 2508 Southwest 125<sup>th</sup> Street Oklahoma City, OK 73170

#### OFFICE OF THE SECRETARY OF STATE



# CERTIFICATE OF GOOD STANDING DOMESTIC FOR PROFIT BUSINESS CORPORATION

I, THE UNDERSIGNED, Secretary of State of the State of Oklahoma, do hereby certify that I am, by the laws of said state, the custodian of the records of the state of Oklahoma relating to the right of certain business entities to transact business in this state and am the proper officer to execute this certificate.

I FURTHER CERTIFY that <u>CLAIMETRICS SERVICES, INC.</u> whose registered agent is <u>DEBBIE SELF</u>, with its registered office at <u>7250 NW EXPRESSWAY STE</u> <u>100 OKLAHOMA CITY 73132 USA</u> Oklahoma is a <u>Domestic For Profit Business</u> <u>Corporation</u> duly organized and existing under and by virtue of the laws of the state of Oklahoma and is in good standing according to the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of the entity's financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I hereunto set my hand and affixed the Great Seal of the State of Oklahoma, done at the City of Oklahoma City, this 6th, day of September, 2007.

Secretary Of State

M. hisaa lavage



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

