## State of Idaho

Office of the Secretary of State

### **AMENDED CERTIFICATE OF AUTHORITY**

OF

### VITALWORKS INC.

File Number C 137642

I, BEN YSURSA, Secretary of the State, hereby certify that an Application for Amended Certificate of Authority, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Amended Certificate of Authority to reflect the name change from VITALWORKS INC. to **AMICAS**, **INC**. and attach hereto a duplicate of the application for such amended certificate.

Dated: 30 August 2005



Ben youra

By D. Sleason



## APPLICATION FOR AMENDED FILED EFFECTIVE CERTIFICATE OF AUTHORITY

(Instructions on back of application)

05 AUG 30 PM 12: 00

To the Secretary of State of the State of Idaho:
Pursuant to Section 30-1-1504, **Idaho Code**, the undersigned Corporation hereby applies for an amended certificate of authority to transact business in the State of Idaho and for that purpose submits the following statement.
Complete only applicable items.

SECRETARY OF STATE STATE OF IDAHO

	Complete only applicable items.
1.	A Certificate of Authority was issued to the corporation by your office on: February 12, 2001
	authorizing it to transact business in the State of Idaho under the name of:
	Amended February 12, 2002 - VitalWorks Inc.
2.	Its corporate name has been changed to: AMICAS, Inc.
3.	The name which it shall use hereafter in the State of Idaho is:
	HA AMICAS, INC.
١.	It has changed its jurisdiction of incorporation, without a change of corporate identity to:n/a
Da	ated: 6205 Corporation Name: AMICAS, Inc.
	Signature:
	Typed Name: Stephen L. Hicks
	Capacity: Vice President and General Counsel
	Customer Acct #:
	(if using pre-paid account)
	Secretary of State use only
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	IDAHO SECRETARY OF STATE  OB/30/2005 05:00  CK: 36843 CT: 1154 BH: 988984  1 @ 26.00 = 26.06 EXPEDITE C 1
	CK: 36843 CT: 1154 BH: 908984 E 8 CK: 11066631 CT: 47921 BH:

# Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "VITALWORKS INC.", FILED A CERTIFICATE OF OWNERSHIP, CHANGING ITS NAME TO "AMICAS, INC.", THE TWENTY-THIRD DAY OF DECEMBER, A.D. 2004, AT 11:18 O'CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF OWNERSHIP IS THE THIRD DAY OF JANUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE

EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE

RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT

BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4119913

DATE: 08-26-05

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