

State of Idaho

Office of the Secretary of State

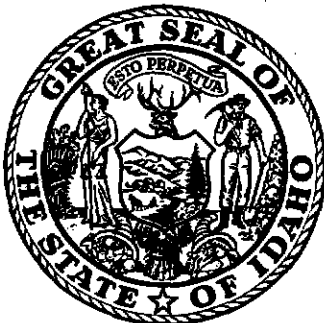
**CERTIFICATE OF AUTHORITY
OF
EXCEL MANAGED CARE & DISABILITY SERVICES, INC.**

File Number C 193239

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, 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 Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: December 30, 2011



Ben Yursa

SECRETARY OF STATE

By

Dinda Corbus

FILED EFFECTIVE

202



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2011 DEC 30 PM 2:28

SECRETARY OF STATE
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

- The name of the corporation is:
Excel Managed Care & Disability Services, Inc.
- The name which it shall use in Idaho is: Excel Managed Care & Disability Services, Inc.
- It is incorporated under the laws of: California
- Its date of incorporation is: Feb. 8, 1993
- The address of its principal office is:
3840C Watt Ave, #200 Sacramento, CA 95821
- The address to which correspondence should be addressed, if different from item 5, is:
same
- The street address of its registered office in Idaho is: 1423 Tyrell Lane, Boise, Idaho 83706
and its registered agent in Idaho at that address is: National Registered Agents, Inc.
- The names and respective business addresses of its directors and officers are:

Name	Office	Address
<u>William V Spaller</u>	<u>CFO</u>	<u>3840C Watt Ave, #200 Sacramento, CA 9</u>
<u>Judy Bailey</u>	<u>President</u>	<u>3840C Watt Ave, #200 Sacramento, CA 9</u>
<u>Steve Smetana</u>	<u>VP</u>	<u>3840C Watt Ave, #200 Sacramento, CA 9</u>
<u>Brenda Smith</u>	<u>Secretary</u>	<u>3840C Watt Ave, #200 Sacramento, CA 9</u>
_____	_____	_____
_____	_____	_____

Dated: 12/28/2011Signature: Typed Name: William V SpallerCapacity: CFO
(The signer must be a director or an officer of the corporation.)

Customer Acct #:

(If using pre-paid account)

Secretary of State use only

 Corporation
 Application
 Fee
 Received
 12/30/2011

 IDAHO SECRETARY OF STATE
 12/30/2011 05:00
 CK: 065646 CT: 172099 BH: 1383947
 1 @ 100.00 = 100.00 AUTH PRO # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3

Web Form

C193239

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

EXCEL MANAGED CARE & DISABILITY SERVICES, INC.

FILE NUMBER: C1851701
FORMATION DATE: 02/08/1993
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of December 19, 2011.

Debra Bowen

DEBRA BOWEN
Secretary of State