

**ATTACHMENT C**

**ILLINOIS CERTIFICATE OF GOOD STANDING**



## OFFICE OF THE SECRETARY OF STATE

JESSE WHITE • Secretary of State

JANUARY 5, 2011

6760-688-4

NRAI CORPORATE SERVICES  
LINDA STAUFFER  
16055 SPACE CENTER BLVD #235  
HOUSTON, TX 77062

RE CURRENTCHOICE, INCORPORATED

DEAR SIR OR MADAM:

IT IS OUR PLEASURE TO APPROVE YOUR REQUEST TO TRANSACT BUSINESS IN THE STATE OF ILLINOIS. FEES IN THIS CONNECTION HAVE BEEN RECEIVED AND CREDITED.

THE CORPORATION MUST FILE AN ANNUAL REPORT AND PAY FRANCHISE TAXES PRIOR TO THE FIRST DAY OF ITS ANNIVERSARY MONTH (MONTH OF QUALIFICATION) NEXT YEAR. A PRE-PRINTED ANNUAL REPORT FORM WILL BE SENT TO THE REGISTERED AGENT AT THE ADDRESS SHOWN ON THE RECORDS OF THIS OFFICE APPROXIMATELY 60 DAYS PRIOR TO ITS ANNIVERSARY MONTH.

SECURITIES CANNOT BE ISSUED OR SOLD EXCEPT IN COMPLIANCE WITH THE ILLINOIS SECURITIES LAW OF 1953, 815 ILLINOIS COMPILED STATUTES, 5/1 ET SEQ. FOR FURTHER INFORMATION, CONTACT THE OFFICE OF THE SECRETARY OF STATE, SECURITIES DEPARTMENT AT (217) 782-2256 OR (312) 793-3384.

SINCERELY,

JESSE WHITE  
SECRETARY OF STATE  
DEPARTMENT OF BUSINESS SERVICES  
CORPORATION DIVISION  
TELEPHONE (217) 782-6961

FORM **BCA 13.15** (rev. Dec. 2003)  
**APPLICATION FOR AUTHORITY TO  
 TRANSACT BUSINESS IN ILLINOIS**  
 Business Corporation Act

**FILED**

**JAN 5 2011**

**JESSE WHITE  
 SECRETARY OF STATE**

Jesse White, Secretary of State  
 Department of Business Services  
 Springfield, IL 62756  
 Telephone (217) 782-1834  
 www.cyberdriveillinois.com

Remit payment in the form of a cashier's  
 check, certified check, money order  
 or an Illinois attorney's or CPA's check  
 payable to the Secretary of State.  
**SEE NOTE 1 CONCERNING PAYMENT!**

6760.688.4  
 File #

Filing Fee \$ 150- Franchise Tax \$ 25- Penalty/Interest \$ - Total \$ 175- Approved: ew  
 -----Submit in duplicate-----Type or Print clearly in black ink-----Do not write above this line-----

1. (a) **CORPORATE NAME:** CurrentChoice, Incorporated

(Complete item 1 (b) only if the corporate name is not available in this state.)

(b) **ASSUMED CORPORATE NAME:** \_\_\_\_\_  
 (By electing this assumed name, the corporation hereby agrees NOT to use its corporate name in the  
 transaction of business in Illinois. Form BCA 4.15 is attached.)

2. State or Country of Incorporation MA; Date of Incorporation 04/28/2010; Period of Duration perpetual

3. (a) Address of the principal office, wherever located: 46 Munroe Road  
Lexington, MA 02421  
 (b) Address of principal office in Illinois:  
 (if none, so state) none

4. Name and address of the registered agent and registered office in Illinois.

Registered Agent: National Registered Agents, Inc.  
 Registered Office: 200 West Adams Street  
Chicago 60606 Cook  
 City Street ZIP Code Suite # County  
(A P.O. Box alone is not acceptable.)

5. States and countries in which it is admitted or qualified to transact business: (Include state of incorporation)

MA, PA