

F03000003932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

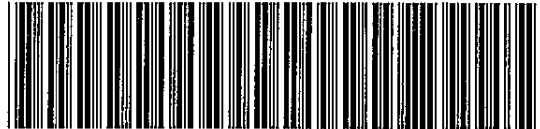
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400022100904

08/07/09--01030--025 **70.00

BK

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 AUG - 7 PM 1:34

RECEIVED

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

03 AUG - 7 PM 3:23

FILED

CT CORPORATION

August 7, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

03 AUG -7 PM 3:23
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 5907686 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Adeza Biomedical Corporation (DE)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton
Sr. Fulfillment, Specialist
Jeff_Netherton@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED
AUG - 7 PM 3:23
TALLAHASSEE, FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Adeza Biomedical Corporation

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware

(State or country under the law of which it is incorporated)

3. 77-0054952

(FEI number, if applicable)

4. 05/07/1996

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 07/15/2003

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 1240 Elko Drive, Sunnyvale, CA 94089

(Principal office address)

same

(Current mailing address)

8. any and/or all lawful business

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: c/o C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

10. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: Cosmin Buzan

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors: SEE ATTACHMENT

03 AUG - 7 PM 3:28
FILED
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Emory V. Anderson

Address: 1240 Elko Drive

Sunnyvale, CA 94089

Vice President: _____

Address: _____


Secretary: Emory V. Anderson

Address: 1240 Elko Drive, Sunnyvale, CA 94089

Treasurer: Mark Fischer-Colbrie

Address: 1240 Elko Drive, Sunnyvale, CA 94089

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Emory V. Anderson, President

(Typed or printed name and capacity of person signing application)

ATTACHMENT

Schedule of Officers and Directors

<i>Name</i>	<i>Position</i>	<i>Address</i>
Emory V. Anderson	President, Secretary, Director	c/o Adeza Biomedical Corporation 1240 Elko Drive Sunnyvale, CA 94089 2105 Canyon Oak Lane Danville, CA 94506
Mark Fischer-Colbrie	Chief Financial Officer	c/o Adeza Biomedical Corporation 1240 Elko Drive Sunnyvale, CA 94089 21211 Rainbow Drive Cupertino, CA 95014
Andrew E. Senyei, M.D.	Director	c/o Adeza Biomedical Corporation 1240 Elko Drive Sunnyvale, CA 94089 2223 Avenida de la Playa, #300 La Jolla, CA 92037
Nancy Burrus	Director	c/o Adeza Biomedical Corporation 1240 Elko Drive Sunnyvale, CA 94089 2180 Sand Hill Road, #450 Menlo Park, CA 94025
Craig C. Taylor	Director	c/o Adeza Biomedical Corporation 1240 Elko Drive Sunnyvale, CA 94089 480 Cowper Street Palo Alto, CA 94301
Kathy LaPorte	Director	c/o Adeza Biomedical Corporation 1240 Elko Drive Sunnyvale, CA 94089 3000 Sand Hill Road, #270 Menlo Park, CA 94025

03 AUG -7 PM 3:23
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

PAGE 1

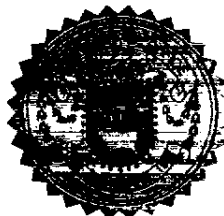
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADEZA BIOMEDICAL CORPORATION" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF AUGUST, A.D. 2003.

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

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

FILED
03 AUG -7 PM 3:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2615867 8300

030510851

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2565960

DATE: 08-05-03