# F08000004835

(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



000137648650

11/10/08-401014--001 \*\*87.50

SEGIECIES ( OF STATE TALLAHASSEE, FLORIDA

1 MOV 10 PM 4: 2(

& Burch NOV 1 0 2008

#### **COVER LETTER**

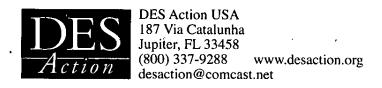
CHID IDOT.	DES Action USA		
SUBJECT:	(Name of Cor	poration – must include suffix)	
Dear Sir or M	Indam:		
Dear Sir or iv	.agam.		
	f Existence", and check are subm	Profit Corporation for Authorization to Conduct its Affairs in F nitted to register the above referenced not for profit corporation t	
Please return	all correspondence concerning th	is matter to the following:	
	Frances Howell		
		(Name of Person)	
	DEC 4-15-1104		
	DES Action USA	(Firm/Company)	
	187 Via Catalunha	(Address)	
		(Addicas)	
	Jupiter, FL 33458		
		(City/State and Zip Code)	
7	6		
for further in	formation concerning this matter,	, please can:	
Frances Hov	المر	at (561 ) 876-1224	
1 1211003 1104	(Name of Person)	(Area Code & Daytime Telephone Number)	
	LING ADDRESS:	STREET/COURIER ADDRESS:	
New Filing Section Division of Corporations		New Filing Section Division of Corporations	
	Box 6327	Clifton Building	
1.0.	hassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANO REGISTER A FO IN THE STATE	CE WITH SECTION 617.1503, FLORIDA S OREIGN NOT FOR PROFIT CORPORATI OF FLORIDA:	STATUTES, TH ON FOR AUTH	E FOLLOWING IS SUBI IORIZATION TO COND	MITTED TO SUCT ITS AFFAIRS	
1. DES Action l	ISA Inc				
(Name of corpo	oration: must include the word "INCORPORAT) age as will clearly indicate that it is a corporatio oresent. "Company" or "Co." may not be used as	n instead of a na	tural person or partnership i	f not so contained on.)	
2. California	3.	94-2597706			
(State or cour	ntry under the law of which it is incorporated)	()	FEI number, if applicable)	<u> </u>	
4. July 20, 1979	5.	perpetual			
	(Date of Incorporation)		ar corp. will cease to exist o	or "perpetual")	
6. August 25, 2	008				
(Date first cond	ucted affairs in Florida if prior to registration. See.	sections 617.1501	& 617.1502, F.S. to determ	ine penalty iability.)	
_	, ,				
7. 187 Via Catal	lunha, Jupiter, FL 33458				
	(Principal o	ffice address)			
same					
34110	(Current ma	iling address)			
	·	,			
(Purpose(s) of o	-profit provides newsletter, physician referra corporation authorized in home state or country eet address of Florida registered agent: (P.O	to be carried out	in the state of Florida)	exposed to the drug, DE	S.
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or round regional and	. Don <u>1101</u> acc	opidolo)		
Name:	Frances Howell	<del></del>			
Office Address:	187 Via Catalunja				
	Jupiter	_, Florida <u>334</u>	58		
,	(City)	_, Piorida <u></u> ,	(Zip Code)		
	• •		· · ·		
Having been na designated in th further agree to	agent's acceptance: med as registered agent and to accept serve is application, I hereby accept the appoint comply with the provisions of all statutes i familiar with and accept the obligations of	nent as register elative to the p	red agent and agree to ac roper and complete perf	ct in this capacity. I	
	1 - 11	/			

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 addresses of officers and/or directors:		
A. DIRECTORS		2008
Chairman:		<b>3</b>
Address:	紧握	5
	工公	_ <u>P</u> _ '
Vice Chairman:	927	1: 2
Address:	D-	
Director: (Executive Director) Frances K. Howell		
Address: 187 Via Catalunha		
Jupiter, FL 33458		
Director; (Program Director) Kari Christianson		
Address: 18556 Ulysses St. NW	<del></del> .	· · · · · · · · · · · · · · · · · · ·
Elk River, MN 55330		
B. OFFICERS		
President:Patti Negri		
Address: 6324 Ivarene Ave.		
Hollywood, CA 90068		<u>_</u>
Vice President; Karen Fernandes		
Address: 3708 Rodale Way # 200		
Dallas, TX 75287		
Secretary: Ann Giblin		
Address: 1441 S. Bedford St #107 Los Angeles, CA 90035		
Treasurer: Kim Mazeres		
Address: 3955 Willow Springs Drive, Reno, NV 89519		W11.1
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or  13.		S.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application	n)	
14. Frances K. Howell, Executive Director  (Typed or printed name and capacity of person signing application)		



#### Additional DES Action Board Members:

Michael Freilick 104 Sleepy Hollow Place Cherry Hill, NJ 08003

Cheryl Roth 220 East 72<sup>nd</sup> St. Apt. 25 E New York, NY 10021

Litsa Varonis 1340 Irondale Circle NE North Canton, OH 44720 200 NOV 10 PH 4: 20

### State of California Secretary of State

CERTIFICATE OF STATUS

2000 NOV 10 PN 4: 20
SECULIABLE OF STATE
TAIL ABASSES STORIDA

ENTITY NAME:

DES ACTION, USA

FILE NUMBER:

C0925439

FORMATION DATE:

07/20/1979

TYPE:

DOMESTIC NONPROFIT 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 October 31, 2008.

DEBRA BOWEN Secretary of State