

F09000001627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

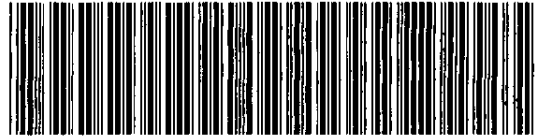
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W09-16561



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DIVISION OF CORPORATIONS
2009 APR 20 PM 3:53

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Mar. 27. 2009 11:35AM Progenika, Inc.

2009 APR 20 PM 3:53

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Progenika, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael Bohan

(Name of Person)

Progenika, Inc.

(Firm/Company)

500 Technology Square 1st Floor

(Address)

Cambridge, MA 02139

(City/State and Zip code)

For further information concerning this matter, please call:

Michael Bohan

(Name of Person)

at (617) 500-1500 x102

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



RECEIVED
DEPARTMENT OF STATE

09 APR 20 PM 4:45

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 8, 2009

MICHAEL BOHAN
500 TECHNOLOGY SQUARE
1ST FLOOR
CAMBRIDGE, MA 02139

SUBJECT: PROGENIKA, INC.
Ref. Number: W09000016561

We have received your document for PROGENIKA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the Federal Employer Identification number in the appropriate section of the application. If applied for, enter "applied for", or if not applicable, enter "N/A".

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 509A00011896

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DIVISION OF CORPORATIONS
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN 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. Progenika, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ino.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 20-8311054
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. 01/19/2007 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 500 Technology Square 1st Floor
(Principal office address)

Cambridge, MA 02139
(Current mailing address)

8. Clinical Laboratory
(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 NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

Corporation Service Company

By: [Signature]
(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.

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

A. DIRECTORS

Chairman: JUAN MIGUEL RETOLAZA VILLACHICA

Address: PARQUE TECNOLOGICO DE BIZKAIA-48160 DERIO-VICAYA-SPAIN

Vice Chairman: _____

Address: _____

Director: ANTONIO MARTINEZ MARTINEZ

Address: PARQUE TECNOLOGICO DE BIZKAIA-48160 DERIO-VICAYA-SPAIN

Director: LAUREANO SIMON BUELA

Address: PARQUE TECNOLOGICO DE BIZKAIA-48160 DERIO-VICAYA-SPAIN

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. ANTONIO MARTINEZ MARTINEZ

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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12. Names and business addresses of officers and/or directors: **ADDENDUM 1**

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: JAVIER PERIS

Address: PARQUE TECNOLOGICO DE BIZKAIA-48160 DERIO-VICAYA-SPAIN

Director: MAURO OLMEDO

Address: PARQUE TECNOLOGICO DE BIZKAIA-48160 DERIO-VICAYA-SPAIN

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. ANTONIO MARTINEZ MARTINEZ

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

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12. Names and business addresses of officers and/or directors: **ADDENDUM 2**

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: RAFAEL ORBEGOZO

Address: PARQUE TECNOLOGICO DE BIZKAIA-48160 DERIO-VICAYA-SPAIN

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. ANTONIO MARTINEZ MARTINEZ

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROGENIKA, INC." 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 FOURTEENTH DAY OF APRIL, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROGENIKA, INC." WAS INCORPORATED ON THE NINETEENTH DAY OF JANUARY, A.D. 2007.

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.

2009 APR 20 PM 3:53
F.H.L.
SECRETARY OF STATE
DIVISION OF CORPORATIONS

4287520 8300

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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7244784

DATE: 04-14-09