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TO:	Registration S Division of C		- ,	D/D			
SUBJ	ECT:	LABNETICS, INC.		1011	4)-2	353	35
		89-00701-0	oration - must inclu S23–D00	de suffix)	000034		- 13 <u>0</u> -0,
"Certif	closed "Applica Ticate of Existen Sact business in	ation by Foreign Corporatio ce", and check are submitte Florida.	n for Authorization d to register the abo	to Transact I)(******/3 Business in Flo d foreign corp	orida", oration	*****()
Please	return all corres	spondence concerning this n	natter to the followi	ng:			
	Clau	dia Haines			_		
		(Nan	ne of Person)				
	Labn	etics, Inc.					
		(Firm	n/Company)		·		-
	1031	5 102nd Terrace	- -			000	SE DIVIS
		(,	Address)			- =	- 35
	Seba	stian, FL 32958				0	
		(City/S	tate and Zip code)		* *	=======================================	- 물유[
		•	,			ယ့	STA
For furt	her information	concerning this matter, ple	ase call:			80	LIONS LE
C1	laudia Haine	s at (56	<u>51) 5</u> 81- 637	1			
	(Name of Pers	on) (A	rea Code & Daytim	e Telephone	Number)	-	
Registra Divisior 409 E. C Tallahas	TADDRESS: ation Section of Corporation Gaines St. ssee, FL 32399		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7			
Enclose	d is a check for	the following amount:					
⊐ \$70.0	00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Certified Cop		\$87.50 Filing Certificate of Certified Co	f Status	&



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 27, 2000

CLAUDIA HAINES LABNETICS, INC. 10315 102ND TERRACE SEBASTIAN, FL 32958

SUBJECT: LABNETICS, INC. Ref. Number: W00000023535

We have received your document for LABNETICS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

The entity's date of incorporation/organization must be listed in the document.

A brief description of the entity's nature of business must be included in the document.

Please return 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) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 700A00050893

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.

State or country under the law of which it is incorporate	3.	59-3625039		
		(FEI number, if applicable)		
Date of incorporation)	_ 5.	Perpetual		
		(Duration: Year corp. will cease to exist or '	perpeti	ıal")
Upon qualification				
(Date first transacted business in Florida. If corporation in (SEE SECTIONS 60'	nas not 7.1501,	transacted business in Florida, insert "upon qu , 607.1502 and 817.155, F.S.)	alificati	on.")
10315 102nd Terrace, Sebastian,	, FL	32958		
(Principal offic	ce addr	ess)		
(**************************************				
See above (Current mailing To conduct any lawful act of may be authorized under the conduct and the conduct an	ng addr rac v th	ctivity for which corpora	tion	6
See above (Current mailing To conduct any lawful act of may be authorized under (Purpose(s) of corporation authorized in home states)	ng addr rac y H	ctivity for which Corpora ve law. untry to be carried out in state of Florida)	00	017
Current mailing To conduct any lawful act of may be authorized under (Purpose(s) of corporation authorized in home states). Name and street address of Florida registered ag	ng addr rac w H e or cou	tivity for which Corporate law. Untry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptance)	ible 2	017
See above (Current mailing To conduct any lawful act of may be authorized under (Purpose(s) of corporation authorized in home states)	ng addr rac w H e or cou	tivity for which Corporate law. Untry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptance)	0 130 00	017
See above (Current mailing To conduct any lawful act of may be authorized under (Purpose(s) of corporation authorized in home state) Name and street address of Florida registered age Name: Copporation Service (ng addr rac w H e or cou	tivity for which Corporate law. Untry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptance)	Md 01 130 00	017
See above (Current mailing To conduct any law ful act of may be authorized under (Purpose(s) of corporation authorized in home states) Name and street address of Florida registered agents and Service (Service) Name: Copporation Service (Service)	ng addr r ac r ac ex H e or cou gent: (tivity for which Corporate Law. Intry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptance)	Md 01 130 00	017
Current mailing To conduct any lawful act of may be authorized under (Purpose(s) of corporation authorized in home states) Name and street address of Florida registered ag	ng addr r ac r ac ex H e or cou gent: (tivity for which Corporate Law. Intry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptance)	0 130 00	017
See above (Current mailing To conduct any law ful act of may be authorized under (Purpose(s) of corporation authorized in home states) Name and street address of Florida registered agent in Service (Service) Fice Address: 1201 hays Street	er ace the or coursent: (tivity for which Corporate law. Intry to be carried out in state of Florida) (P.O. Box or Mail Drop Box NOT acceptance Ay Florida 3230/ (Zip code)	00 0CI 10 PM 3: 08	DIVISION OF CORPORATIONS

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.

. DIRECTOR	
	David Illingworth
	N. Committee of the com
idress:	Sebastian, FL 32958
ce Chairman: _	
ldress:	10315 102nd Terrace
	Sebastian, FL 32958
rector:	
ldress:	* The state of the
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rector:	The state of the s
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OFFICERS	· · · · · · · · · · · · · · · · · · ·
esident:	Michael J. Otworth
ldress:	10315 102nd Terrace
	Sebastian, FL 32958
ce President: _	David Illingworth
dress:	10315 102nd Terrace
	Sebastiam, Florida 32958
 sistant	KāthleenFColes
cretary:	
ldress:	10315 102nd Terrace, Sebastian, FL 32958. David P. Szostak
easurer:	David 1. Bookean
ddress:	10315 102nd Terrace, Sebastian, FL 32958
	the state of the s
OTE: If nece	ssary, you may attach an addendum to the application listing additional officers and/or directors.
3	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
	Kathleen Cole - Assistant Secretary
4	(Typed or printed name and capacity of person signing application)

State of Delaware Office of the Secretary of State

PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LABNETICS, 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 TWENTY-NINTH DAY OF AUGUST, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ERANCHISE TAXES
HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

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001437497

AUTHENTICATION: 0645938

DATE: 08-29-00