F0160000 5816

| | TRANSMITTAL LETT | ER |
|--|--|--|
| TO: Registration Section Division of Corporations | | |
| SUBJECT: Medxcite, Inc., | , a Delaware Corporation | ı |
| (| Name of corporation - must incl | lude suffix) |
| Dear Sir or Madam: | | |
| The enclosed "Application by Forei "Certificate of Existence", and chec to transact business in Florida. | gn Corporation for Authorizatio k are submitted to register the al | n to Transact Business in Florida", bove referenced foreign corporation |
| Piease return ali correspondence con | ncerning this matter to the follow | ving: |
| Solomon Zoberman | <u>.</u> | · · · · · · · · · · · · · · · · · · · |
| | (Name of Person) | |
| Buckingham, Doolittle & | Burroughs, LLP | |
| - | (Firm/Company) | |
| 2500 N. Military Trail, | Suite 480 | |
| | (Address) | |
| Boca Raton, FL 33431 | , | |
| The second of the second | (City/State and Zip code) | 800004567968 |
| in the state of th | • | -09/04/0101094019 *****78.75 *****78. |
| For further information concerning the | his matter, please call: | 本本本本本(②。(○ 本本本本本(②。 |
| Section 1988 - Section 1988 - Section 1989 Section 1989 | the factor of the second of th | wo\- 2067 |
| Solomon Zoberman | at (561 _) 241-041 | 4 |
| (Name of Person) | (Area Code & Daytir | ne Telephone Number) |
| | | ŕ |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Fallahassee, FL 32399 | MAILING A Registration Division of O P.O. Box 632 Tallahassee, | Section Corporations Corporations AHASSEE BE SECTION OF THE SECTIO |
| Enclosed is a check for the following | amount: | |
| | iling Fee & \$78.75 Filing ate of Status Certified Cop | |
| | | inte |

September 6, 2001

SOLOMON ZOBERMAN 2500 N. MILITARY TRAIL, STE 480 BOCA RATON, FL 33431

SUBJECT: MEDXCITE, INC. Ref. Number: W01000020672

We have received your document for MEDXCITE, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

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 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 at (850) 245-6097. □ □ □ □

Michael Mays Document Specialist

Letter Number: 201A00050205

PM 8: 28
- STATE
- FLORIDA

FILED

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. Medxcite, Inc. | |
|--|--|
| (Name of corporation; must include the word "INCORPO words or abbreviations of like import in language as will a natural person or partnership if not so contained in the natural person." | clearly indicate that it is a corporation instead of a |
| 2 Delaware | 365-1013068 |
| (State or country under the law of which it is incorporated) | (FEI number, if applicable) |
| 4December 29, 2000 | 5. Perpetual |
| (Date of incorporation) | 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") |
| 6. Upon qualification. | |
| (Date first transacted business in Florida. If corporation has (SEE SECTIONS 607. | as not transacted business in Florida, insert "upon qualification.") .1501, 607.1502 and 817.155, F.S.) |
| 7. 2550 N.W. 4th Court, Ft. Lauderda | le, FL 33311 |
| (Principal office | e address) |
| Same | <u></u> |
| 8(Purpose(s) of corporation authorized in home state | tivity for which corporations may be ation Law of the State of Delaware. or country to be carried out in state of Florida) |
| 9. Name and street address of Florida registered age Name: BDB Agent Co., an Ohio corpo | |
| Office Address: 2500 N. Military Trail, Suit | |
| Boca Raton, FL 33131 | Florida 33431 |
| (City) | (Zip code) |
| 10. Registered agent's acceptance: | |
| aesignated in this application, I nereby accept the application | service of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity. tes relative to the proper and complete performance of my ns of my position as registered agent. |
| Assistant Registered agent Secretary | 's signature) |
| 11. Attached is a certificate of existence duly authentica | ted, not more than 90 days prior to delivery of this application t |
| the Department of State, by the Secretary of State or other | er 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:

A. DIRECTORS

| Chairman: | Thomas Godart |
|--------------|--|
| - Address: _ | 330 Isle of Capri, Ft. Lauderdale, FL 33301 |
| Director: _ | Rudy Noriega Morel |
| Address: 🕒 | 9262 Southern Orchard Rd., David, FL 33328 |
| Director: _ | Jorge L. De Cespedes |
| Address: _ | 3075 NW 107th Avenue, Miami, FL 33172 |
| Director: | Robert Gray |
| Address: _ | 4731 Pine Tree Drive, Miami Beach, FL 33140 |
| Director: | Joe Vittoria |
| Address: | 1616 South Ocean Boulevard, Palm Beach, FL 33480 |
| | |
| | |
| B. OFFI | CERS |
| President: | Craig Genmill |
| Address: | 8621 Chase Drive, Chagrin Falls, OH 44023 |
| | |
| Vice Presi | dent: Rudy Noriega Morel |
| Address: | 9262 Southern Orchard Road, David, FL 33328 |
| | SEECH POLICY CONTRACTOR OF THE |
| —Secretary: | Rudy Noriega Morel |
| Address: | |
| Treasurer | Thomas Godart |
| Address: | 330 Isle of Capri, Ft. Lauderdale, FL 33301 |
| NOTE: | If necessary, you may attach an addendum to the application listing additional officers and/or directors. |
| | (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) |
| 14 | Rudy Noriega Morel, Vice President; Secretary; Director (Typed or printed name and capacity of person signing application) |
| | (1 Abed of bringed marine and cabacity of berson signing abbication) |

State of Delaware

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MEDXCITE, 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 THIRTIETH DAY OF OCTOBER, A.D. 2001.

O1 NOV -8 PM 8: 28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Warriet Smith Windson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 1418393

DATE: 10-30-01

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