F02000003194

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MEDICAL Chemical Corporation 6/24
(Name of corporation - must include suffix)

FOR CORP

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.

MJH

Please return all correspondence concerning this matter to the following:

LINDA Culpepper
(Name of Person)

MEDICAL Chemical Corporation
(Firm/Company)

19430 Van Ness Ave.
(Address)

Torrance CA 90504
(City/State and Zip code)

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-06/24/02--01020--003
*****70.00 *****70.00

For further information concerning this matter, please call:

LINDA Culpepper at (310) 787 6800 x228
(Name of Person) (Area Code & Daytime Telephone Number)

FILED
02 JUN 24 AM 9:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration 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
02 JUN 24 AM 9:30

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. MEDICAL Chemical 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. New York
(State or country under the law of which it is incorporated)

3. 13-2916150
(FEI number, if applicable)

4. 6/27/1977
(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 not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 19430 Van Ness Ave. Torrance, CA 90504
(Principal office address)

Same
(Current mailing address)

8. Ship products to our Customers in Florida
(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: Corporation Service Co.

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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TALLAHASSEE FLORIDA

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.

Cynthia A Harris **Cynthia L. Harris as its agent**
(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:**

A. DIRECTORS

Chairman: _____

Address: _____

_____

Vice Chairman: _____

Address: _____

_____

Director: Emmanvel Didier

Address: 19430 Van Ness Ave
Torrance CA 90501

Director: _____

Address: _____

_____

B. OFFICERS

President: Emmanvel Didier

Address: 19430 Van Ness Ave
Torrance, CA 90501

Vice President:(s) PATRICK Braden ✓ Andrew Rocha

Address: 19430 Van Ness Ave
TORRANCE CA 90501

Secretary: Patrick Braden

Address: Same

Treasurer: _____

Address: _____

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. EMMANUEL R DIDIER
(Typed or printed name and capacity of person signing application)

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of MEDICAL CHEMICAL CORPORATION was filed on 06/27/1977, under the name of SONOSYNERGIC CORPORATION, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

A Certificate of Amendment SONOSYNERGIC CORPORATION, changing its name to WAVE ENERGY SYSTEMS, INC., was filed 10/28/1977.

A Certificate of Amendment WAVE ENERGY SYSTEMS, INC., changing its name to MEDICAL CHEMICAL CORPORATION, was filed 07/02/1997.

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Witness my hand and the official seal of the Department of State at the City of Albany, this 14th day of June two thousand and two.

Special Deputy Secretary of State

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