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TRANSMITTAL LETTER

TO:	Registration S Division of Co			•
SUBJ	ECT: R	adiancy, Incorporate	ed.	
5020			ration - must include suffix)	
Dear S	ir or Madam:			
"Certif	icate of Existen sact business in	ce", and check are submitted	i for Authorization to Transact to register the above referent tatter to the following:	
	Debra Tamp	akis	- · · · ·	N OFF
		(Nan	ne of Person)	
	Radiancy I	nc.		A REPORT
		(Firn	n/Company)	= 33
	40 Ramland	Rd. South Suite 10		o is
		(.	Address)	
	Orangeburg	, New York 10962		
		(City/S	tate and Zip code)	- T
For fur	ther information	n concerning this matter, ple	ase call:	W03-10137
Ś	Simona Konk	ol at (845) 398-1647	
	(Name of Per	· x-	rea Code & Daytime Telepho	one Number)
Registr Divisio 409 E.	ET ADDRESS ration Section on of Corporation Gaines St. assee, FL 3239	ons	MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	ns
Enclos	ed is a check fo	r the following amount:		
□ \$70	.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status & Certified Copy + (one extra page)



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 9, 2003

DEBRA TAMPAKIS
RADIANCY, INC.
40 RAMLAND RD. SOUTH SUITE 10
ORANGEBURG, NY 10962

SUBJECT: RADIANCY, INC. Ref. Number: W03000010137

We have received your document for RADIANCY, INC. and your check(s) totaling \$88.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your application did not include the second page. Attached is a new, blank second page for you to complete and return.

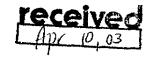
Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence, which usually consists of a single sheet of paper and clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificateof existence from the same office that provided you with the certified copy.

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) 245-6958.

Lee Rivers Document Specialist

Letter Number: 403A00021278



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.

l. Radia	ancy, Inc.					
words or abbre	oration; must include the word "INo viations of like import in language or partnership if not so contained in	as will clearly in	ndicate that it is a o			
2Dela	aware	3	13-403127	1 .		
(State or country	y under the law of which it is incor	porated)	(FEI	number, if appli	icable)	
	ober 13, 1998	5	perpetual			
(Dat	te of incorporation)	(Duration: Year co	orp. will cease to	exist or "per	petuai")
0.	uary 1, 2003	÷				
(Date first transa	acted business in Florida. If corpo (SEE SECTIO		ansacted business 607.1502 and 817.		"upon qualif	ication.")
7. 40 R	amland Road South Suit			w York 1096	52	
	(Princi	pal office addre	ss)			
same	as above	****				
	·	nt mailing addre				DIVISION OF CO
8. sale	of medical devices					五二
(Purpose	(s) of corporation authorized in ho	me state or cour	itry to be carried o	ut in state of Flo	rida)	20 元
9. Name and st	of medical devices. (s) of corporation authorized in ho reet address of Florida registe Ron Broadway	ered agent: (l	P.O. Box or Mail	Drop Box NO	T_acceptabl	e) = 2990
Name	Don Broadway					三翼
Name;	KOII BIOAGWAY	,	· ·	. •	. •	- P
Office Address:	8006 12th Ave South	@ Rejuve 1	TC			<u>.</u> .
	St Petersburg.		Florida 3	3707		
	St. Petersburg, (City)			Zip code)		
			·	-		
	agent's acceptance:	and and namin	a of muocass for s	tka abaya stata	d sovnovati	on at the place
	med as registered agent and to is application, Lhereby accept					
further agree to	comply with the provisions of	all statutes re	lative to the prop	er and comple	ete performa	ince of my
duties, and I am	familiar with and accept the	obligations of . A	my position as re	egistered ageni	Í.	
	I	//a.				
	TOUPSU	adle	M_		Fier B.	
·	Regist	ered agent's sign	nature)			
11. Attached is	a certificate of existence duly a	uthenticated, r	ot more than 90	days prior to d	elivery of th	is 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:	40 Ramland Boad South Suite	10
	Orangeburg, New York 10962	
Vice Chairman:	J J' /	
Director:		
		0
n officers		Vision Vision
B. OFFICERS		A SECTION
President:		20 STEE
Address:		
		= 9
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		<u> </u>
Address:		
NOTE: If necessary, you	attach an addendurate the application listing additional officers and	d/or directors.
13.	of Chairman Wise Chairman on any officer listed in number 12 of the	annliantion)
	ire of Chairman, Vice Chairman, or any officer listed in number 12 of the a	фрисаноп)
14	(Typed or printed name and canacity of person signing application)	

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RADIANCY, 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 SIXTH DAY OF MAY, A.D. 2003.

DIVISION OF CORPORATIONS



Darriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2402735

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