

## Florida Department of State Division of Corporations Public Access System

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Division of Corporations

FRE Number (850) 205-0383

From:

: UCC FILING & SEARCH SERVICES, INC. Account Name

Account Number : I19980000054 Phone (850) 681-6528

Pax Number

: (850)681-6011

## FOREIGN PROFIT\_QUALIFICATION

Toxicology Consultants and Assessment Specialists, I

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NCC SERVICES

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

I COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO EGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Toxicalogy Con	nsultants and Assessment Specialists, inc.		
(Enter name of or	orporation; must include "INCORPORATED." "COMPANY." "CORPORATION," (orp.," "Inc.," "Co.," or "Corp.")		
(If name unavails	able in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)		
(State or country	under the law of which it is incorporated) (PEI number, if applicable)		
Induser 2 100	5. Perpetural		
•	of incorporation) (Duration: Year COSP. Will coase to exist of "perpetual")		
s. <u>7-/</u>	7 - 2504 (Date first transacted business in Florids, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)		
7. 5788 Sanibel-C	aptiva Road, Sanibel, FL 33957		
	(Principal office address)		
2155 Singing W	Voods Drive, Skenesteles, New York 13152		
	,		
	for which corporations may be organized under the Business Corporation Law of NY state.	<u>:</u>	
(Purposo(s	s) of corporation authorized in home state or country to be earried out in state of Florida)	: 7	
9. Name and afree	et address of Florida registered agent: (P.O. Box NOT acceptable)		
Name:	UCC Filling & Search Services, Inc.		- 3
Office Address:	529 East Park Avenue	***	
	Tallahassee, Florida 32301		
	(City) (Zip code)	Ţ	
Having been num designated in this further agree to o	gent's acceptance: sed as registered agent and to accept service of process for the above stated corporation at the plac s application, I hereby accept the appointment as registered agent and agree to act in this capacity comply with the provisions of all statutes relative to the proper and complete performance of my di r with and accept the obligations of my position as registered agent.	u F	
	ACISM HAND, ASST SRC (Registered agent's signature)		
the Department of under the law of w	certificate of existence duly authenticated, not more than 90 days prior to delivery of this application of State or other official having custody of corporate records in the jurisdict which it is incorporated.  usings addresses of officers and/or directors:		

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. DIRECTORS

hairman: William R. Sawyer

## State of New York Department of State ss:

I hereby certify, that the Certificate of Incorporation of TOXICOLOGY CONSULTANTS AND ASSESSMENT SPECIALISTS, INC. was filed on 01/03/1994, under the name of TOXICOLOGY CONSULTANTS & ASSESSMENT SERVICES, INC., 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 components is an estation expension. I further certify the following,

A certificate changing name to TOXICOLOGY CONSULTANTS AND ASSESSMENT SPECIALISTS, INC. was filed on 12/20/1994.

- A Biennial Statement was filed 02/21/1996.
- A Biennial Statement was filed 01/20/1998.
- A Riennial Statement was filed 02/04/2000.
- A Biennial Statement was filed 12/17/2001.
- A Riennial Statement was filed 01/14/2004.

I further certify, that no other documents have been filed by such Corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of December two thousand and four.

Secretary of State

secretary of state

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