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## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DRUGISTIC PHARMACEUTICALS AND MATERIAL MEDICINES INC.  
(Name of corporation - must include suffix)

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.

Please return all correspondence concerning this matter to the following:

KRISTY MUCK

(Name of Person)

NEVADA CORPORATE CENTER INC.

(Firm/Company)

2248 MERIDIAN BOULEVARD, SUITE H

(Address)

MINDEN, NEVADA 89423

(City/State and Zip code)

For further information concerning this matter, please call:

KRISTY MUCK

(Name of Person)

at ( 775 ) 284-7168

(Area Code & Daytime Telephone Number)

**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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. DRUGISTIC PHARMACEUTICALS AND MATERIAL MEDICINES INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEVADA

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. DECEMBER 8, 2004

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2248 Meridian Blvd, Ste H, Minden, NV 89423

(Principal office address)

(Current mailing address)

8. PHARMACEUTICALS AND HEALTH PRODUCT DEVELOPMENT

(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 NOT acceptable)

Name: KAREN MALLER

Office Address: BANK OF AMERICA TOWER ONE PROGRESS PLAZA NO. 1210

ST. PETERSBURG

(City)

, Florida 33701

(Zip code)

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ADMIN. SERV. 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.*

Karen E. Malley  
(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: WEN YEONG CHI

Address: 2248 MERIDIAN BOULEVARD, SUITE H  
MINDEN, NV 89423

Vice Chairman: WEN YEONG CHI

Address: 2248 MERIDIAN BOULEVARD, SUITE H  
MINDEN, NV 89423

Director: WEN YEONG CHI

Address: 2248 MERIDIAN BOULEVARD, SUITE H  
MINDEN, NV 89423

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: WEN YEONG CHI

Address: 2248 MERIDIAN BOULEVARD, SUITE H  
MINDEN, NV 89423

Vice President: WEN YEONG CHI

Address: 2248 MERIDIAN BOULEVARD, SUITE H  
MINDEN, NV 89423

Secretary: WEN YEONG CHI

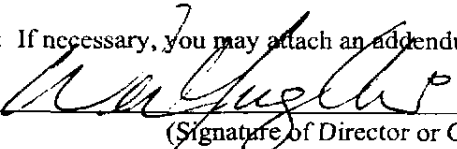
Address: 2248 MERIDIAN BOULEVARD, SUITE H, MINDEN, NV 89423

Treasurer: WEN YEONG CHI

Address: 2248 MERIDIAN BOULEVARD, SUITE H, MINDEN, NV 89423

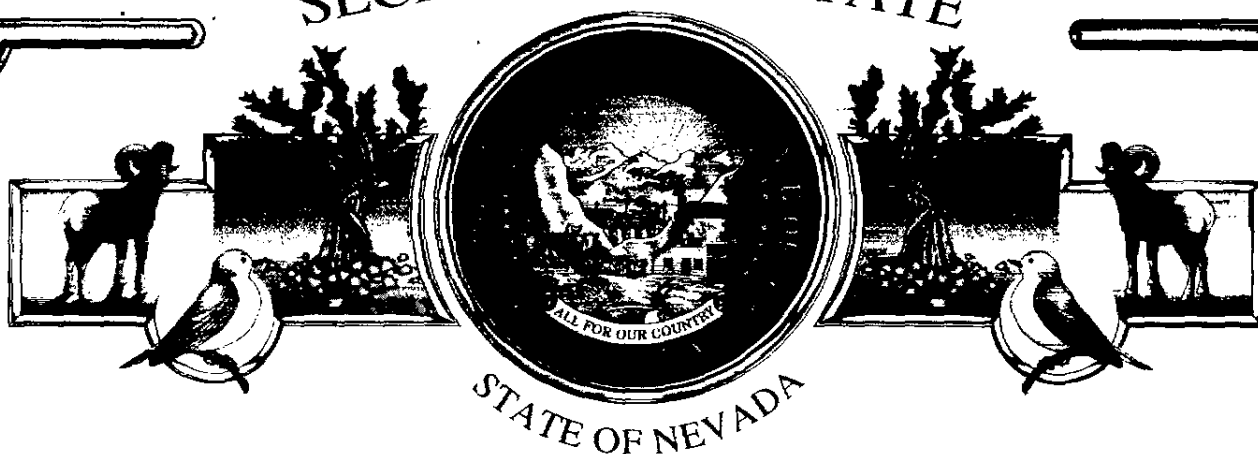
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ALABAMA

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. WEN YEONG CHI, PRESIDENT  
(Typed or printed name and capacity of person signing application)

# SECRETARY OF STATE



## CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **DRUGISTIC PHARMACEUTICALS AND MATERIAL MEDICINES, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 8, 2004, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office, in Carson City, Nevada, on December 15, 2004.



*Dean Heller*

DEAN HELLER  
Secretary of State

By *Shonda J. Jinn*  
Certification Clerk