F05000003817

# Florida Department of State
## Division of Corporations
## Electronic Filing Cover Sheet

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To:

Division of Corporations
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From:

Account Name : C T CORPORATION SYSTEM
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TALLAHASSEE, FLORIDA

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: tgarringer@pacificcresttech.com

RECEIVED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**

**PACIFIC CREST TECHNOLOGY, INC.**

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | $35.00 |

NC

2/24/10

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TALLAHASSEE, FLORIDA

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

(Pursuant to s. 607.1504, F.S.)

## SECTION I
(1-3 MUST BE COMPLETED)

F05000003817
(Document number of corporation (if known))

1. Pacific Crest Technology, Inc.
(Name of corporation as it appears on the records of the Department of State)

2. Oregon
(Incorporated under laws of)

3. 06/30/2005
(Date authorized to do business in Florida)

## SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 12/24/2009

5. Prodapt North America, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

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

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Brad Greer
(Typed or printed name of person signing)

President
(Title of person signing)

*CERTIFICATE*

# *State of Oregon*

*OFFICE OF THE SECRETARY OF STATE*
*Corporation Division*

*I, KATE BROWN, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:*

*That the attached copy of the*
***Articles of***
***Amendment***
*filed on*
***December 24, 2009***
*for*
***PACIFIC CREST TECHNOLOGY, INC.***
*changing the name to*
***PRODAPT NORTH AMERICA, INC.***
*is a true copy of the original document that has been filed with this office.*

*In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.*

*KATE BROWN, Secretary of State*

*By* Jodi Forsberg
*Jodi Forsberg*
*February 19, 2010*

VOID IF ALTERED OR ERASED

Phone: (503) 986-2200
Fax: (503) 378-4381

# Articles of Amendment—Business/Professional/Nonprofit

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327
FilingInOregon.com

Check the appropriate box below:
☐ BUSINESS/PROFESSIONAL CORPORATION
(Complete only 1, 2, 3, 4, 5, 7)
☐ NONPROFIT CORPORATION
(Complete only 1, 2, 4, 6, 7)

FILED
DEC 24 2009
OREGON
SECRETARY OF STATE

REGISTRY NUMBER: 579320-80

In accordance with Oregon Revised Statute 192.410-192.490, the information in this application is public record. We must release this information to all parties upon request and it will be posted on our website.

For office use only.

Please Type or Print Legibly in Black Ink.

1) ENTITY NAME: PACIFIC CREST TECHNOLOGY, INC.

2) STATE THE ARTICLE NUMBER(S) AND SET FORTH THE ARTICLE(S) AS IT IS AMENDED TO READ. (Attach extra sheet if necessary.)

ARTICLE I - THE NAME OF THE CORPORATION IS PRODAPT NORTH AMERICA, INC.

3) THE AMENDMENT WAS ADOPTED ON: 12/2/09

(If more than one amendment was adopted, identify the date of adoption of each amendment.)

## BUSINESS/PROFESSIONAL CORPORATION ONLY

4) CHECK THE APPROPRIATE STATEMENT.

☑ Shareholder action was required to adopt the amendment(s). The vote was as follows:

| Class or series of shares | Number of shares outstanding | Number of votes entitled to be cast | Number of votes cast FOR | Number of votes cast AGAINST |
|---|---|---|---|---|
| COMMON | 9,000 | 9,000 | 9,000 | -0- |

☐ Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.

☐ The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

## NONPROFIT CORPORATION ONLY

5) CHECK THE APPROPRIATE STATEMENT.

☐ Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

☐ Membership approval was required. The membership vote was as follows:

| Class(es) entitled to vote | Number of memberships entitled to vote | Number of votes entitled to be cast | Number of votes cast FOR | Number of votes cast AGAINST |
|---|---|---|---|---|
| | | | | |

6) EXECUTION
Signature: [signature]
Printed Name: BRADLEY L. GREER
Title: PRESIDENT

7) CONTACT NAME (To receive questions with this filing.)
Margaret Yonston Greer
DAYTIME PHONE NUMBER (Include area code.)
312-751-1245

## FEES

Required Processing Fee: $20
Certified Copy (Optional): $5
No Fee for Nonprofit Type Change.
No Fee for Name/Address Change.
Processing Fees are nonrefundable.
Please make check payable to "Corporation Division"
NOTE:
Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

AR (Rev. 07/07)

PRODAPT NORTH AMERICA, INC.

57932080-11521445 AMDART

VOID WITHOUT WATERMARK OR IF ALTERED OR ERASED

VOID IF ALTERED OR ERASED

# TRANSACTION REPORT

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*Reznicsek, Fraser, Hastings, White & Shaffer P.A.*
*4230 San Pablo Professional Court, Suite 200*
*Jacksonville, Florida 32224*
*Phone: (904) 567-1060*
*Facsimile: (904) 567-1065*

**To:** Division of Corporations **From:** Donna Ciancutti

**Fax:** 850-617-6380 **Pages:** 3 4

**Phone:** **Date:** February 11 23, 2010

**Re:** Mandal Diabetes Research Institute, Inc. **CC:**

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

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