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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Topo 6E	EN, Inc.			
SUBJECT: Topo GEN, Inc. (Name of corporation - must include suffix)				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation f "Certificate of Existence," and check are submitted t transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to tter to the following:	i >		
Please return all correspondence concerning this mat	tter to the following:	4		
Soren M (Name				
		5		
Topo GEN (Firm/Company)				
(Firm/	Company)	د		
Port Orange FL 32128				
(A	ddress)			
Port Ora	nge FL 32128			
(City/Sta	te and Zip code)			
For further information concerning this matter, pleas	se call:			
Mark T. Muller at (386) 451-3377 (Name of Person) (Area Code & Daytime Telephone Number)				
(Name of Person) (Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 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 \$\square\$ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy			

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. Topo 6 EN, Inc. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
(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. OH (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 25/2/91 5. Dec pet ual (Duration: Year corp. will cease to exist or "perpetual")
6(Date first transacted business in Florida, if prior to registration)
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 108 Aces Allex Port Orange FL 32.1285 (Principal office address)
(Current mailing address)
(Current mailing address)
8. Research Diagnostic Products Manufacturer FOR PROFFITE (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: Soren Muller
Office Address: 108 Acres Alley
Office Address: 108 Acro Alley Port Orange, Florida 32128 (City) (Zip code)
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.
(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: Mark T- Muller	
Address: 2010 South Creck Blud	
Port Orange, FL 32128	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
	- 33 3
B. OFFICERS	730
President: Mark T. Muller	-5 ==
Address: 2010 SouthCreek Blvd	
Port Orange, FL 32128	
Vice President: Coto(A. Muller	<u> </u>
Address: 2010 South Crerk Blud	
Port Orange, FL 32128	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional office	re and/or directors
• • • • • • • • • • • • • • • • • • • •	
13. Mark T. Muller (Signature of Director or Officer listed in number 12 of the application))
14. Mark T. Muller, Preside	
(Typed or printed name and capacity of person signing application)	

United States of America State of Ohio Office of the Secretary of State

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show TOPOGEN, INC., an Ohio corporation, Charter No. 790949, having its principal location in Columbus, County of Franklin, was incorporated on February 25, 1991 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 4th day of October, A.D. 2005

Ohio Secretary of State

Validation Number: V2005277025541