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(Requestor's Name)

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(City/State/Zip/Phone #)

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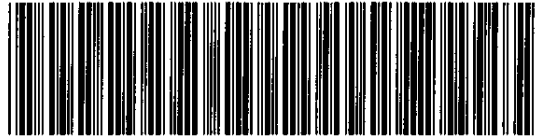
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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Philadelphia, PA 19103-3291

December 28, 2007

Florida Department of State Division of Corporations

**Re: Registering a Foreign Profit Corporation to Transact Business in Florida –
GeneWize Life Sciences, Inc.**

Dear Madam/Sir:

Enclosed please find a check for \$87.50 for the Filing Fee, the Certificate of Status, and the Certified Copy, the application for registration of a foreign profit corporation to transact business in Florida, and an original certificate of existence for GeneWize Life Sciences, Inc. Please do not hesitate to contact me with any questions or concerns that you may have.

Sincerely,

Nevena Simidjiyska

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: GeneWize Life Sciences, 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:

Monte E. Taylor, Jr.
(Name of Person)

GeneWize Life Sciences, Inc.
(Firm/Company)

317 Wekiva Spring Road, #200
(Address)

Longwood, Florida 32779
(City/State and Zip code)

For further information concerning this matter, please call:

Monte E. Taylor, Jr. at (407) 260-1989
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing 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

**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. GeneWize Life Sciences, Inc.

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

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

2. Delaware

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

3. _____

(FEI number, if applicable)

4. _____

(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. 317 Wekiva Spring Road, #200, Longwood, FL 32779

(Principal office address)

317 Wekiva Spring Road, #200, Longwood, FL 32779

(Current mailing address)

8. Marketing and distributing genetically guided nutrition, skin and health products.

(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: Monte E. Taylor, Jr.

Office Address: 317 Wekiva Spring Road, #200

Longwood


(City)

, Florida 32779

(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Dr. Bernard L. Kasten, Jr.

Address: 317 Wekiva Spring Road, #200

Longwood, FL 32779

Vice Chairman: _____

Address: _____

Director: Monte E. Taylor, Jr.

Address: 317 Wekiva Spring Road, #200

Longwood, FL 32779

Director: Dr. Robert P. Ricciardi

Address: 317 Wekiva Spring Road, #200

Longwood, FL 32779

B. OFFICERS

President: Monte E. Taylor, Jr.

Address: 317 Wekiva Spring Road, #200

Longwood, FL 32779

Vice President: _____

Address: _____

Secretary: Dr. Robert P. Ricciardi

Address: 317 Wekiva Spring Road, #200, Longwood, FL 32779

Treasurer: Dr. Robert P. Ricciardi

Address: 317 Wekiva Spring Road #200, Longwood, FL 32779

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. Monte E. Taylor, Jr., President

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

ADDENDUM

ADDITIONAL DIRECTORS

1. Director: John H. Souza
Address: 317 Wekiva Spring Rd. #200
2. Director: Robert Hoekstra
Address: 317 Wekiva Spring Rd. #200

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GENEWIZE LIFE SCIENCES, 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 EIGHTEENTH DAY OF DECEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GENEWIZE LIFE SCIENCES, INC." WAS INCORPORATED ON THE TWELFTH DAY OF DECEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

4472610 8300

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You may verify this certificate online
at corp.delaware.gov/authver.shtml



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6248263

DATE: 12-18-07