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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECRETARY OF STATING TALLAHASSEE, FLORIC

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FORGET THE MATH. DO THE BCIENCE APR 28 AH 8: 00

IN ISION OF CORPORATIONS

April 25, 2008

Becky McKnight Regulatory Specialist II Florida Department of State PO Box 6327 Tallahassee, FL 32314

Dear Becky:

We, Cellular Metabolic Innovations (CMI) Inc., plan to operate and sale all business in the State of Florida. Enclosed you will find the certificate of good standing from the State of Delaware where we are incorporated. Please let me know if there is anything else you may need.

Sincerely,

Darlene King

CFO

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Cellular Metala	ation - must include suffix)	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," and check are submitted transact business in Florida.	for Authorization to Transact Business in Florida," to register the above referenced foreign corporation to	
Please return all correspondence concerning this ma	tter to the following:	
Darkne L	. Kina	
(Nam	e of Person)	
CMI, T	C.	
(Firm	(Company)	
3810 n. 20	Hn Ave	
(A	ddress)	
Hollywo	ad FC 33020	
· · · · · · · · · · · · · · · · · · ·	ate and Zip code)	
For further information concerning this matter, plea	se call:	
Darlene King at 9	4,920 9201	
(Name of Person) (Ar	ea Code & Daytime Telephone Number)	
	·	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
New Filing Section New Filing Section		
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301	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 & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2008

DARLENE L KING 3810 N 29TH AVE HOLLYWOOD, FL 33020

SUBJECT: CELLULAR METABOLIC INNOVATIONS (CMI) INC.

Ref. Number: W08000017274

We have received your document for CELLULAR METABOLIC INNOVATIONS (CMI) INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight Regulatory Specialist II New Filing Section

Letter Number: 308A00019756

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	E WITH SECTION 607.1503, FLORIDA STATUTES REIGN CORPORATION TO TRANSACT BUSINES		TED TO		
1. Enter name of c	orporation; "Co," or "Corp.")	5 (CMI) Inc.	 -		
	sp, 1110, 00, 01 001p.)				
(If name unavail	able in Florida, enter alternate corporate name adopted f	or the purpose of transacting business	in Florida)		
2. Del	albare. 3.	20-4184038	3		
	under the law of which it is incorporated)	(FEI number, if applicable)			
4. <u>San</u>	<u>, 23, 2006</u> 5.	Perpetual		<u>.</u>	
(Date	of incorporation) (Duration	on: Year corp. will cease to exist or "p	erpetual")		
6	(Date first transacted business in Florida,	if prior to registration)			
00.	(SEE SECTIONS 607.1501 & 607.1502, F.S.,				
7. <u>'381</u>	0 n. 2017 Ave +1011)	MOOD, FC 330X	<u>^</u>		
	(Principal office address)				
	(Current mailing address)	,			
Q:-	to localistic in the				
8. (Purpose(s	of corporation authorized in home state or country to b	be carried out in state of Florida)			
•	et address of Florida registered agent: (P.O. Box N	•	TA SI	90	
	Coclored V 100	<u>.v. r</u> . acceptatore)	FIG:	ΑPR	2
Name:	1052 DU 70 - 1120		385 885	20	日本
Office Address:	1973 1 W 12na way	00 0	E E		
•		lorida 3302C	45.5 415.5	<u>.</u>	Ì
	(City)	(Zip code)	P A	15	
•	gent's acceptance: ed as registered agent and to accept service of pro	cess for the above stated cornorate	ion at the i	nlace	
designated in this	application, I hereby accept the appointment as re	egistered agent and agree to act in	this capa	city. I	
	omply with the provisions of all statutes relative to with and accept the obligations of my position as		unce oj m	y auttes),
	\cap \cap \bullet .				
	1 bollong of the				
_	(Registered agent's signature)	7			
11. Attached is a	certificate of existence duly authenticated, not more	than 90 days prior to delivery of t	his applica	ition 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: Derek Ethiopi
Address: 2209 Mariner (+, # 2509.
Dania, FL 33312
Vice Chairman:
Address:
Director: Divene Ung
Address: 653 NW 72 nd Way
Pembrole Pines, FC 33024
Director:
Address:
O8 APR
B. OFFICERS SET TO A TO
President: Devel throat
Address: 2209 Mayiner C+ # ZSOO 59 5
Dania, FL 33312 \$# 5
Vice President:
Address:
Secretary: Daylene King
Address: 1083 NW 72nd Way Rembroke Pines, FC 33024
Treasurer: Dor ere Ling
Address: 1963 NW Frad Way tembrola Fines, FL 33024
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Director or Officer listed in number 12 of the application)
14. Daviene King CFO
(Typed or printed name and capacity of person signing application)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CELLULAR METABOLIC INNOVATIONS (CMI) 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 TENTH DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.





Warriet Smith Windson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6515802

DATE: 04-10-08

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