Florida Department of State

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FOREIGN PROFIT/NONPROFIT CORPORATION

William Houston Reed, Ph.D. Ltd.

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DEPARTMENT OF STATES

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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.

N. A.	"Corp," "Inc," "Co," or "Corp.")			
	nilable in Florida, enter alternate corporate n	ame adopted fo	or the purpose of transacti	ng business in Florida)
2. Pennsylvan	ia ry under the law of which it is incorporated)	_ 3	25-1890561	
(State or count	ry under the law of which it is incorporated)		(FBI number, if app	olicable)
4. 6/12/2001		5. Perpe	tual	
· ·			tual n: Year corp. will cease t	
5	7/2/09			
(Date first tran	7/2/09 sacted business in Florida. If corporation ba	s not transacted	i business in Florida, inse	rt "upon qualification.")
	(SEE SECTIONS 607.	1501, 607.15 0 2	2 and 817.155, F.S.)	
7	Court, Pittsburgh, Pennsylvania 15229			
	(Principal office	address)		
141 Spruce	Court, Pittsburgh, Pennsylvania 15229			
	(Current mailing	address)	:	
			•	
3. All lawful b				
(Purpose	e(s) of corporation authorized in home state	or country to b	carried out in state of Fl	orida)
. Name and st	reet address of Florida registered age	nt: (P.O. Box	or Mail Drop Box NO	Tacceotable) ~
	reet address of Florida registered age	nt: (P.O. Box	or Mail Drop Box <u>NO</u>	Tacceptable)
	reet address of Florida registered ages Business Filings Incorporated	nt: (P.O. Box	or Mail Drop Box <u>NO</u>	Taccemable) 289
Name:		· · · · · · · · · · · · · · · · · · ·	or Mail Drop Box <u>NO</u>	M AUG
Name:	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10	1		ZOON AUG -4
Name:	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10	1		M AUG -4 PORETARY O
Name:	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10	1	or Mail Drop Box <u>NO</u> orida 32301-2960 (Zip code)	M AUG -4 A BORETARY OF S LAHASSEE, FL
Name: Office Address:	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10	1		M AUG -4 PORETARY O
Name: Office Address: 10. Registered Having been na	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10 Tallahassee (City) agent's acceptance: med as registered agent and to accept s	1 , Flo	orida 32301-2960 (Zip code)	M AUG -4 A ID 5 The place of corporation at the place of the pl
Name: Office Address: 10. Registered Having been na designated in th	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10 Tallahassee (City) agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appo	, Flo	orida 32301-2960 (Zip code) ress for the above states gistered agent and agr	ORETARY OF STATE of the place of act in this capacity.
Name: Office Address: 10. Registered Having been na lesignated in th Unther agree to	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10 Tallahassee (City) agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appo comply with the provisions of all statut	floor, Fl	orida 32301-2960 (Zip code) eess for the above states gistered agent and agri	ORETARY OF STATE of the place of act in this capacity.
Name: Office Address: 10. Registered Having been na lesignated in th Unther agree to	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10 Tallahassee (City) agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appo	floor, Fl	orida 32301-2960 (Zip code) eess for the above states gistered agent and agri	ORETARY OF STATE of the place of act in this capacity.
Name: Office Address: O. Registered Faving been na lesignated in th urther agree to	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10 Tallahassee (City) agent's acceptance: med as registered agent and to accept s is application, I hereby accept the apportance comply with the provisions of all statut ar with and accept the obligations of my	floor, Fl	orida 32301-2960 (Zip code) eess for the above states gistered agent and agri	ORETARY OF STATE of the place of act in this capacity.
Name: Office Address: 10. Registered Having been na lesignated in th urther agree to	Business Filings Incorporated 1203 Governors Square Blvd., Suite 10 Tallahassee (City) agent's acceptance: med as registered agent and to accept s is application, I hereby accept the appo comply with the provisions of all statut	floor, Fl	orida 32301-2960 (Zip code) eess for the above states gistered agent and agri	ORETARY OF STATE of the place of act in this capacity.

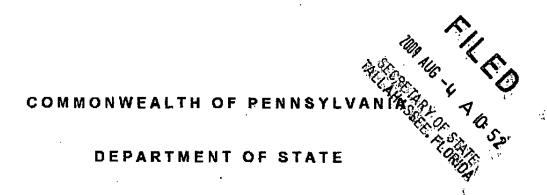
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12. Names and business addresses of officers and/or directors:

under the law of which it is incorporated.

H090001750203

A. DIRECTORS	14490 4
Chairman:	THE STATE OF THE S
Address:	1445 A 1052
	Too.
/ice Chairman:	
Address:	·
Director: William Houston Recd, Ph.D.	
Address: P.O. Box 15145, Pittsburgh, Pennsylvania	15237
Director.	
Address:	
President: William Houston Reed, Ph.D. Address: P.O. Box 15145, Pittsburgh, Pennsylvania	
lice President:	·
.ddress:	
coretary: William Houston Reed, Ph.D.	
ddress: P.O. Box 15145, Pittsburgh, Pennsylvania 1	5237
reasurer: William Houston Reed, Ph.D.	
ddress: P.O. Box 15145, Pittsburgh, Pennsylvania	15237
11.00 6 1	he application listing additional officers and/or directors.
4 William Houston Reed, Ph.D., President	••
(Typed or printed name and ca	pacity of person signing application)



JULY 1, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

WILLIAM HOUSTON REED PH.D., LTD.

Is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 8158469-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp