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

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850) 278-5368

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

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FOREIGN PROFIT/NONPROFIT CORPORATION

Wellness & Prevention, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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date of submission 248

Electronic Filing Menu

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Corporate Filing Menu

2/8/2012



February 9, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

RE-SUBMIT
Please retain original filing
date of submission 2/8

SUBJECT: WELLNESS & PREVENTION, INC.

REF: W12000007916

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The attached Schedule A reflects a different entity name.

Please return 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) 245-6901.

Pamela Smith Regulatory Specialist II FAX Aud. #: 812000034145 Letter Number: 012A00005723

P.O BOX 6327 - Tallahassee, Florida 32314

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.

	vention, Inc. corporation; must include "INCORPORATED corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"	_
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida	-
Michigan	3	38-3414346	
	under the law of which it is incorporated)	(FEI number, if applicable)	-
11/5/1997	5.	Perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	_
n/a	·		
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
130 South First S	Street, Ann Arbor, MI 48104		_
	(Principal office add	dross)	_
•	•	·	
	(Current mailing ad-	dress)	_
		·	
Develop and del	iver digital health coaching programs.		- -
Develop and del (Purpose(s	iver digital health coaching programs. o) of corporation authorized in home state or c	country to be carried out in state of Florida)	- .
(Purpose(s	iver digital health coaching programs. o) of corporation authorized in home state or coaching and the state of the state	\vec{A}	
(Purpose(s) of corporation authorized in home state or o	\vec{A}	12121
(Purpose(s	c) of corporation authorized in home state or one address of Florida registered agent: (P. C T Corporation System	\vec{A}	-83
(Purpose(s	e) of corporation suthorized in home state or our address of Florida registered agent: (P.	\vec{A}	
(Purpose(s Name and stree	c) of corporation authorized in home state or one address of Florida registered agent: (P. C T Corporation System	O. Box NOT acceptable) ACC ACC ACC ACC ACC ACC ACC ACC ACC A	8-834
(Purpose(s Name and stree	c) of corporation authorized in home state or out address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road	O. Box NOT acceptable) ACCEPTABLE ACCEPT	-874
(Purpose(s Name and stree Name: ffice Address:	et address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation (City)	O. Box NOT acceptable) ACC ACC ACC ACC ACC ACC ACC ACC ACC A	8-834
(Purpose(s Name and stree Name: ffice Address:). Registered as aving been name	c) of corporation authorized in home state or one address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept servents.	O. Box NOT acceptable) A Control of the shore stated corporation arther above stated corporation arther arther acceptable)	FEB -8 AH II: 5 place
(Purpose(s Name and stree Name: ffice Address: Registered as a ving been name signated in this	c) of corporation authorized in home state or one address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept serve application. I hereby accept the appoint	O. Box NOT acceptable) A HANGE STATE OF THE above stated corporation derived the stated as registered agent and agree to act in this cape	Place place
(Purpose(s Name and stree Name: ffice Address: Registered as aving been names ignated in this striker agree to c	et address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes	O. Box NOT acceptable) All All All All All All All All All Al	Place place
(Purpose(s Name and stree Name: ffice Address: Registered as aving been names ignated in this striker agree to c	c) of corporation authorized in home state or one address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept serve application. I hereby accept the appoint	O. Box NOT acceptable) All All All All All All All All All Al	Place place
(Purpose(s Name and stree Name: ffice Address: Registered as aving been names ignated in this striker agree to c	et address of Florida registered agent: (P. C T Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: and as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my positions.	O. Box NOT acceptable) All All All All All All All All All Al	PEB -8 AH II: 55 place picity.

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.

71.019 - 03/01/7011 C T System Online

Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: See attached Schedule A Vice Chairman: _____ Director: Address: _ Director: _ Address: BSEE, F B. OFFICERS President: See attached Schedule A Address: _ Vice President: Address: ... Secretary: ____ Treasurer: Address: ____ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. Douglas K. Chia, Assistant Secretary (Typed or printed name and capacity of person signing application)

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F1.819 - 01/01/2011 CT Bystem Online

Schedule A

Wellness & Prevention, Inc. formerly known as;

HealthMedia, Inc.

Date 12/16/2011

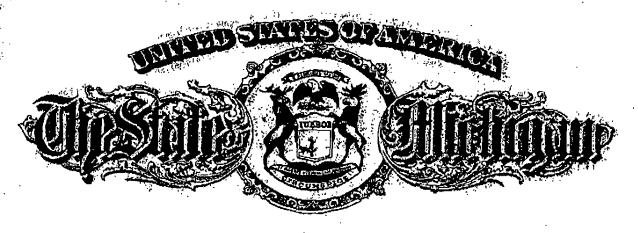
130 South First Street

Ann Arbor MI 48104

Current Elections / Appointments

Board Positions						_	
Name	Position	Appointed	Job Title	Appt. Grp. Status	Reminder	Att.	<u>-</u>
Andrew, Christopher J	Director	09/21/2009	Director	Directors		[2]	Ç
Gupta, Sarday	' Director	10/31/2011	Director	Directors		(2)	3
Officers					·		_
Name	Position	Appointed	Job Title	Appt. Grp. Status	Reminder	Att.	
Gupta, Sanjay	President	08/16/2010	President	Officers		Q)	ě
Sregorka, David	Vice President	10/27/2009	Vice President	Officers		Ø.	5
Ternes, John	Treasurer	10/27/2009	Treasurer	Officers		W)	6
Andrew, Christopher J	Secretary	09/21/2009	Secretary	Officers		Z	
Chla, Dougias K	Assistant Secretary	10/27/2008	Assistant Secretary	Officers		Ø	
Chung, Daniel	Assistant Secretory	05/09/2011	Assistant Secretary	Officers		Z	Š.
laenicke, Brian T	Assistant Secretary	03/30/2009	Assistant Secretary	Officers		(1)	Š
earce, Laurte J	Assistant Secretary	05/09/2011	Assistant Secretary	Officers			1
Rickles, Laurence S	Assistant Secretary	03/30/2009	Assistant Secretary	Officers		V	Ž.
Sharkey, John F	Assistant Secretary	10/27/2008	Assistant Secretary	Officers		V	

http://cems.jnj.com/company/officers.asp?QR=HEALTHMEDI&RESULTS=YES&DEFAULT=Y 12/16/2011





This is to Certify That

WELLNESS & PREVENTION, INC.

was validly incorporated on November 5, 1997, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

SECREDARY OF STATE TALLAHASSEE, FLORIDA

12 FEB -8 AH II: 51



GOLD SEAL APPEARS ONLY ON ORIGINAL

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 20th day of January, 2012.

----- Directo

Bureau of Commercial Services

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CT CORPORATION

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02/13/2015 11:38