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DATE: 05-10-2012

NAME: RIMIDI DIABETES, INC.

**TYPE OF FILING: APPLICATION BY FOREIGN CORPORATION TO
TRANSACT BUSINESS IN FLORIDA**

COST: \$70.00

RETURN: PLAIN COPY

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Rimidi Diabetes, 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," or "Certificate of Good Standing" 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:

Lucienne Marie Ide

Name of Person

Rimidi Diabetes, Inc.

Firm/Company

370 Minorca Ave., Ste. 20

Address

Coral Gables, FL 33134

City/State and Zip code

lucie@rimidi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lucienne Marie Ide at (404) 317-4400

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. Rimidi Diabetes, Inc.
(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. Delaware 3. _____
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. March 16, 2012 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist of "perpetual")

6. February 9, 2012
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501, & 607.1502, F.S., to determine penalty liability)

7. 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134
(Principal office address)

Same
(Current mailing address)

8. Technology and innovation in Healthcare industry
(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: Lucienne Marie Ide

Office Address: 370 Minorca Ave., Ste. 20

Coral Gables Florida 33134
(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.

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

A. DIRECTORS

Chairman: Lucienne Marie Ide

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

Vice Chairman: A. Michael Albisser

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

Director: R. William Ide, III

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

Director: _____

Address: _____

B. OFFICERS

President: Lucienne Marie Ide

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

Vice President: Robert D. DeHaven

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

Secretary: R. William Ide, III -- Secretary and Treasurer

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

Treasurer: A. Michael Albisser -- Chief Science and Technology Officer

Address: 370 Minorca Ave., Ste. 20, Coral Gables, FL 33134

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

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. Lucienne Marie Ide, President

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

SECRETARY OF STATE
CIVILIAN SERVICE
12 MAY 1970 AM 8:22

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RIMIDI DIABETES, 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 NINTH DAY OF MAY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIMIDI DIABETES, INC." WAS INCORPORATED ON THE SIXTEENTH DAY OF MARCH, A.D. 2012.

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

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9561625

DATE: 05-09-12