

F15000001153

Division of Corporations

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**Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

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

Email Address: michael@wvfronthome.com

**FOREIGN PROFIT/NONPROFIT CORPORATION
WAVEFRONT HEALTH TECHNOLOGIES, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

RECEIVED
15 MAR 19 AM 11:45
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAR 19 AM 8:41

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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.*

1. Wavefront Health Technologies, 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. New York

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

3. 13-4194790

(FEI number, if applicable)

4. October 29, 2001

(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. 3330 FAIRCHILD GARDENS PO BOX 85929 PALM BEACH GARDENS, FL 33420

(Principal office address)

3330 FAIRCHILD GARDENS PO BOX 85929 PALM BEACH GARDENS, FL 33420

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Greenspoon Marder, P.A.

Office Address: 200 East Broward Blvd., Suite 1800

Fort Lauderdale

(City)

, Florida 33301

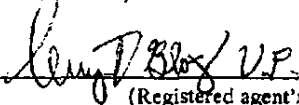
(Zip code)

9. 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.

Greenspoon Marder, P.A.

By:



(Registered agent's signature) Gregory J. Blodig, Esq. *as VP*

10. 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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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: John Michael Gregson

Address: 2462 SE Marius Street

Port St. Lucie, Florida 33420

Vice Chairman: Denise V. Garcia

Address: 2462 SE Marius Street

Port St. Lucie, Florida 33420

Director: Michael A. Wetula

Address: 9250 Pineville Drive

Lake Worth, Florida 33467

Director:

Address:

B. OFFICERS

President: John Michael Gregson

Address: 2462 SE Marius Street

Port St. Lucie, Florida 33420

Vice President:

Address:

Secretary: Denise V. Garcia

Address: 2462 SE Marius Street, Port St. Lucie, Florida 33420

Treasurer: Denise V. Garcia

Address: 2462 SE Marius Street, Port St. Lucie, Florida 33420

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.12. 

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.

13. John M. Gregson, Chairman and President

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

15 MAR 19 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of WAVEFRONT HEALTH TECHNOLOGIES, INC. was filed on 10/29/2001, under the name of MEIZNER INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment MEIZNER INC., changing its name to HTA ADVISORS LTD., was filed 12/18/2013.

A Certificate of Amendment HTA ADVISORS LTD., changing its name to WAVEFRONT HEALTH TECHNOLOGIES, INC., was filed 03/02/2015.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 11th day of March
two thousand and fifteen.

Anthony Giardina
Executive Deputy Secretary of State