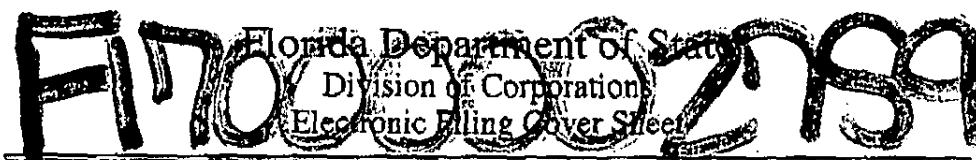


Division of Corporations

<https://efile.sunbiz.org/scripts/efilcovr.exe>



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

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

Email Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FOREIGN PROFIT/NONPROFIT CORPORATION  
LOVELACE BIOMEDICAL AND ENVIRONMENTAL  
RESEARCH INSTI**

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

D. SCOTT  
JUN 19 2017

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. LOVELACE BIOMEDICAL AND ENVIRONMENTAL RESEARCH INSTITUTE, INC.

(Name of corporation; must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership (if not so contained in the name at present, "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Mexico

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

3. \_\_\_\_\_

(FEI number, if applicable)

4. 07/30/1975

(Date of Incorporation)

5. \_\_\_\_\_

(Date of duration, if other than perpetual)

6. Upon filing

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 2425 Ridgcrest Drive SE, Albuquerque, NM 87108

(Principal office address)

(Current mailing address, if different)

8. Biomedical and environmental research seeking the causes and cures for respiratory diseases.

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Corporate Creations Network Inc.

Office Address: 11380 Prosperity Farms Road #221E

Palm Beach Gardens

(City)

Florida 33410

(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.*

Caith Lazarus, Special Secretary

(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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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

A. DIRECTORS

Chairman: Please see attached

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Please see attached

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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

13. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Caitlin Lazarus, Attorney-in-Fact  
(Typed or printed name and capacity of person signing application)

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**LOVELACE BIOMEDICAL AND ENVIRONMENTAL RESEARCH INSTITUTE, INC.**

**Officers**

CEO: Robert W. Rubin  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

President: Steven A. Belinsky  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

Secretary/Treasurer: Tess Burleson  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

**Directors**

Chairman: Robert W. Rubin  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

Vice Chairman: Charles H. Hobbs  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

Secretary of the Board: Frances Laur  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

Tess Burleson  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

Steven A. Belinsky  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

Shannon Toma  
2425 Ridgecrest Drive SE  
Albuquerque, NM 87108

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**OFFICE OF THE SECRETARY OF STATE  
NEW MEXICO**

***Certificate of Good Standing and Compliance***

IT IS HEREBY CERTIFIED THAT:

**LOVELACE BIOMEDICAL AND ENVIRONMENTAL RESEARCH INSTITUTE, INC.  
848770**

the above named entity, a Corporation incorporated under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Nonprofit Corporation, under the

**Nonprofit Corporation Act**

**53-8-1 to 53-8-99 NMSA 1978**

having filed its Articles of Incorporation on July 30, 1975, and Certificate of Incorporation issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: June 14, 2017

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.



*Maggie Toulouse Oliver*  
Maggie Toulouse Oliver  
Secretary of State

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SECRETARY OF STATE  
SANTA FE, NEW MEXICO

**Certificate Validation #: 0009910**

A certificate issued electronically from the New Mexico Secretary of State's office is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Validation option on the Business Filing System at <https://portal.sos.state.nm.us/bfs/online> and following the instructions displayed under Certificate Validation.