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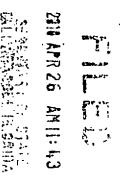
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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
CHDI	DIASYST, INC.				
SODA		e of corporatio	n - mus	t include suffix	· · · · · · · · · · · · · · · · · · ·
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation to	ate of Good Sta	inding"	and check are sub	
Please Chun '	return all correspondence conce Yong	rning this matt	er to the	e following:	
		Name o	i Persoi	1	· · · · · · · · · · · · · · · · · · ·
DIAS	YST, INC.				
	·	Firm/Co	mpany		
641 No	orth Ave NE #3407				
		Add	ress		
Atlant	a, GA 30308				
		City/State	and Zip	code	
chun@	diasyst.com				
	E-mail addr	ess: (to be used	for fut	ure annual report:	notification)
For fu	rther information concerning this	matter, please	call:		
Chun '	Yong	404	54	543-9924	
	Name of Person	at (Area Co	de	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclos	sed is a check for the following a	mount:			
<b>□</b> \$70	0.00 Filing Fee <b>S78.75</b> Fi Certificat	ling Fee & e of Status		.75 Filing Fee & iffied Copy	S87.50 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. DIASYST, INC. i. (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) Delaware (State or country under the law of which it is incorporated) (FEI number, if applicable) 11/20/2015 4. (Date of duration, if other than perpetual) (Date of incorporation) N/A (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 641 North Ave NE #3407, Atlanta, GA 30308 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 3030 N. Rocky Point Dr., STE 150A Office Address: Tampa \_\_ , Florida (City) 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.

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: \_\_\_\_\_ Vice Chairman: Address: Director: Address: **B. OFFICERS** Chun Yong President: \_ 641 North Ave NE #3407 Address: Atlanta, GA 30308 Tim Eggena Vice President: 911 Layfield Branch Rd Address: Hamilton, GA 31811 Secretary: Address: 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 11 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. Chun Yong 13.

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



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DIASYST, 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 TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DIASYST, INC."

WAS INCORPORATED ON THE TWENTIETH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

at coun delaware gov/aut

Authentication: 10498371

Date: 11-25-15