1/30/2019

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (855)330-1010 Fax Number

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Email	Address:	
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## FOREIGN PROFIT/NONPROFIT CORPORATION

Anogen Life Sciences, Inc.

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

Electronic Filing Menu Corporate Filing Menu

Help

## 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.

Anogen Life S				
	corporation; must include "INCORPORATED or "Corp." "Inc.," "Co.," or "Corp.")	," "COMPANY," "CORPORATION,"		
(If name unavail	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting bus	iness in Florida)	
Delaware		3		
(State or count	ry under the law of which it is incorporated)	(FEI number, if applicable)		
7/10/2017		5 Perpetual		
(Dat	e of incorporation)	(Date of duration, if other than perpetual)		
·				
	(Date first transacted business	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
7901 4th St N 9	STE 300 St. Petersburg FL 33702			
	(Princ	cipal office address)		
500 S. Federal	Hwy Unit #941 Hallandale Beach FL 330			
	(Current mai	ling address, if different)		
	ret address of Florida registered agent: (I Registered Agents Inc.	P.O. Box <u>NOT</u> acceptable)	19 JAN 30 CECS INS	
Name: Office Address:	7901 4th St N STE 300	<del></del>	4	
	St. Petersburg	Florida 33702	AH 10: 57	
	(City)	(Zip code)	57 58	
9 Registered as	(Cny) gent's acceptance:	(Zip code)	<u></u> ₹₩ <b>3</b>	

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 Agents Inc.

Bill Havre - Assistant Secretary

(Registered agent's signature)

0. 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 ruler the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \*\*SEE ATTACHED\*\* Address: Vice Chairman: "SEE ATTACHED" Address: Director: "SEE ATTACHED" Address: Director: \*\*SEE ATTACHED\*\* Address: B. OFFICERS President: "SEE ATTACHED" Vice President: "SEE ATTACHED" Address: Secretary: "SEE ATTACHED" Address. Treasurer: "SEE ATTACHED" Address: dium to the application listing additional officers and/or directors. NOTE: If necessary, you may 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. STEVEN B. BETTIS, CEO AMOGEN LIFE SCIENCES

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

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

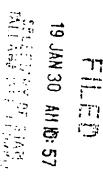
David Adair, Chairman 7901 4th St N STE 300 St. Petersburg FL 33702

Seth Yakatan, Director 7901 4th St N STE 300 St. Petersburg FL 33702

Andreas Reiff, Director 7901 4th St N STE 300 St. Petersburg FL 33702

Steven Bettis, Director, President 7901 4th St N STE 300 St. Petersburg FL 33702

Victoria Rudman, VP, Secretary, Treasurer 500 S. Federal Hwy Unit #941 Hallandale Beach FI. 33008



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## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ANOGEN LIFE SCIENCES, 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-THIRD DAY OF JANUARY, A.D.

2019.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANOGEN LIFE SCIENCES, INC." WAS INCORPORATED ON THE TENTH DAY OF JULY, A.D. 2017.

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

Authentication: 202131459

Date: 01-23-19

6473285 8300

SR# 20190452583