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ACCOUNT NUMBER:

F970000006126  
FCA08000000005

REFERENCE:  
(SUB ACCT.)

DATE:

11-19

100002351581--9

REQUESTER NAME: LEXIS DOCUMENT SERVICES

W97-26176

ADDRESS: P.O. BOX 2969  
SPRINGFIELD, ILLINOIS 62708

CONTACT NAME: CYNTHIA WOODYARD (904) 877-7296

CORPORATION NAME:

Aphoton Corporation

AUTHORIZATION:

C. Woodyard

☒ CERTIFIED COPY (1-9)  
☒ CERTIFICATE OF STATUS (1-9)  
☐ PLAIN STAMPED COPY

☐ CALL WHEN READY ☐ CALL IF PROBLEM ☐ AFTER 4:30  
☒ WALK IN ☐ WILL WAIT ☐ PICK-UP  
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Name conflict  
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97 NOV 19 PM 3:14  
NOV 19 AM 10:32

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File 2nd



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

November 19, 1997

LEXIS DOCUMENT SERVICES

SUBJECT: APHTON CORPORATION  
Ref. Number: W97000026176

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We have received your document(s) in this office, however, a copy of the document is being returned for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Doc #F94-4670  
withdrawn  
11/19.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please list the street address of each officer/director. If the officer/director does not have a street address, list a P.O. Box and write (N/A) beside the box number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt  
Document Examiner

Letter Number: 197A00055529

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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. ASHTON CORPORATION

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "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.)

2. DELAWARE

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

3. 95-364-0931

(FBI number, if applicable)

4. OCTOBER 30, 1997  
(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. OCTOBER 30, 1997

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. P.O. BOX 1049

WOODLAND, CA 95776

(Current mailing address)

8. The Purpose is to engage directly or indirectly, in any lawful act under the  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of  
Florida) General Corporation Law.

9. Name and street address of Florida registered agent

Name: ASHTON CORPORATION

Office Address: WORLD TRADE CENTER MIAMI, 80 S.W. 81st STREET, SUITE 2160

MIAMI, Florida, 33149-3047

(Zip Code)

10. Registered agent 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 obligation of my position as registered agent.

(Registered agent's signature) (Officer)

Philip Gevas / Chairman, CEO and President

(Type Name and Title of Officer)

(11 - 2789 - 9/27/97)

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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.

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

A. DIRECTORS

Chairman: PHILIP C. GERVAS  
Address: P.O. BOX 1049 N/A  
WOODLAND, CA 95776

Vice Chairman: WILLIAM A. HASLER  
Address: P.O. BOX 1049 N/A  
WOODLAND, CA 95776

Director: ROBERT S. BASSO  
Address: P.O. BOX 1049 N/A  
WOODLAND, CA 95776

Director: NICHOLAS JOHN STATHIS  
Address: P.O. BOX 1049 N/A  
WOODLAND, CA 95776

B. OFFICERS

President: PHILIP C. GEVAS  
Address: P.O. BOX 1049 N/A  
WOODLAND, CA 95776

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Secretary: PHILIP C. GEVAS  
Address: P.O. BOX 1049 N/A  
WOODLAND, CA 95776

CHIEF ACCOUNTING OFFICER:

FRED JACOBS

Address:

P.O. BOX 1049

N/A

WOODLAND, CA 95776

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

13.

*Fred Jacobs*

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

14.

FRED JACOBS CHIEF ACCOUNTING OFFICER

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

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.1501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF ~~Delaware~~, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Aphton Corporation

2. The name and address of the registered agent and office is:

Lexis Document Services  
(NAME)  
3953 W.W. Kelley Road  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)  
Tallahassee FL 32311  
(CITY/STATE/ZIP)

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

C. Woodward, as agent  
(SIGNATURE)

Nov. 19, 1997  
(DATE)

*State of Delaware*  
*Office of the Secretary of State*

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "APHTON CORPORATION" 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 SEVENTEENTH DAY OF NOVEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APHTON CORPORATION" WAS INCORPORATED ON THE THIRTIETH DAY OF OCTOBER, A.D. 1997.

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



A handwritten signature in cursive script, reading "Edward J. Freel".

Edward J. Freel, Secretary of State

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AUTHENTICATION: 8760996

DATE: 11-17-97

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