

F98000005792

Document Number Only

CT Corporation System

Requestor's Name  
660 East Jefferson Street

Address  
Tallahassee, FL 32310 222-1092

City State Zip Phone

CORPORATION(S) NAME

200002661652--2

-10/12/98--01093--002

\*\*\*1150.00 \*\*\*1150.00

200002661652--2

-10/12/98--01093--001

\*\*\*\*\*70.00 \*\*\*\*\*70.00

w98-23126

Pennsylvania Regional Tissue and Transplant  
Bank, Inc.

- ☒ Profit  
☐ NonProfit  
☒ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Fictitious Name  
☐ Certified Copy  
☐ Call When Ready  
☒ Walk In  
☐ Mail Out
- ☐ Amendment  
☐ Dissolution/Withdrawal  
☐ Annual Report  
☐ Name Registration  
☐ UCC-1 Financing Statement  
☐ Photo Copies  
☒ Call if Problem  
☐ Will Wait
- ☐ Merger  
☐ Limited Liability Company  
☐ Other  
☐ Change of FSA  
☐ UCC-3 Filing  
☐ CUS  
☐ After 4:30  
☒ Pick Up

98 OCT 12 AM 8:08

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

mtu  
10/16

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Availability
Document Examiner
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Verifier
Acknowledgment
W.P. Verifier

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Thank You!!

Hope

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FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

October 12, 1998

C T CORPORATION SYSTEM

SUBJECT: PENNSYLVANIA REGIONAL TISSUE AND TRANSPLANT BANK  
INC.  
Ref. Number: W98000023126

We have received your document for PENNSYLVANIA REGIONAL TISSUE AND TRANSPLANT BANK INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Written approval and clearance of the terms BANK, BANKER, BANC, BANKING, TRUST COMPANY, BANCSHARES, SAVINGS & LOAN ASSOCIATION, SAVINGS BANK, or CREDIT UNION must be obtained from the Division of Banking and Finance, pursuant to section 655.922(2a), Florida Statutes. The address is:

Division of Banking  
Director's Office  
101 E. Gaines St.  
Fletcher Bldg., 6th Floor.  
Tallahassee, FL 32399-0350  
(850) 488-1111.

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

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays  
Document Specialist

Letter Number: 498A00050532

*Attn: Mike Mays  
Please backdate!*

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DIVISION OF CORPORATIONS



ROBERT F. MILLIGAN  
COMPTROLLER OF FLORIDA

OFFICE OF COMPTROLLER  
DEPARTMENT OF BANKING AND FINANCE  
STATE OF FLORIDA  
TALLAHASSEE  
32399-0350

October 13, 1998

Ms. Wynelle Frederick  
Customer Specialist  
CT Corporation system  
1635 Market Street  
Philadelphia, PA 19103

Dear Ms. Frederick:

Re: "Pennsylvania Regional Tissue and Transplant Bank, Inc."

Thank you for your recent letter/fax requesting approval for use of the above-referenced name. It is the opinion of this Department that your name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Department does not object to your use of the above-referenced name being registered as a foreign corporation in the State of Florida.

Sincerely,

Art Simon  
Director  
Division of Banking  
101 East Gaines Street  
The Fletcher Building - Sixth Floor  
Tallahassee, FL 32399-0350  
(850) 488-1111

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DIVISION OF CORPORATIONS  
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:kr

cc: Karon Beyer, Chief  
Bureau of Corporate Records  
Division of Corporations  
Secretary of State's Office

**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. PENNSYLVANIA REGIONAL TISSUE AND TRANSPLANT BANK 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.)
2. PA USA  
(State or country under the laws of which it is incorporated)
3. August 14, 1978  
(Date of Incorporation)
4. PERPETUAL  
(Duration)
5. 23-2084370  
(Federal Employer Identification number, if applicable)
6. JUNE 1997  
(Date corporation first conducted affairs in Florida. See sections 617.1501, 617.1502, and 617.155, F.S.)
7. 814 CEDAR AVENUE SCRANTON, PA 18505  
(Current mailing address)
8. TO PROCURE AND PROCESS HUMAN TISSUE FOR RESEARCH  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Names and addresses of officers and/or directors:

**A. Directors:**

Chairman: \_\_\_\_\_

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

Vice Chairman: \_\_\_\_\_

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

Director: RICHARD DICKSON

Address: 814 CEDAR AVENUE

SCRANTON PA 18505

Director: JOYCE LOMMA

Address: 814 CEDAR AVENUE

SCRANTON PA 18505

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**B. Officers:**

President: MICHAEL NAZARENKO  
Address: 814 CEDAR AVENUE  
SCRANTON PA 18505

Vice President: JERRY WEINBERGER  
Address: 814 CEDAR AVENUE  
SCRANTON PA 18505

Secretary: EDWARD D'AGOSTINO  
Address: 814 CEDAR AVENUE  
SCRANTON PA 18505

Treasurer: MICHAEL COSTELLO  
Address: 814 CEDAR AVENUE  
SCRANTON PA 18505

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(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

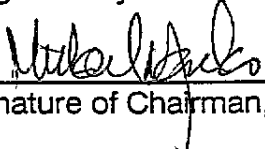
Name: C T CORPORATION SYSTEM  
Office Address: c/o C T CORPORATION SYSTEM, 1200 S. Pine Island Rd.,  
Plantation, Florida 33324  
Zip Code

**11. 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.

By:   
ANN Q. WILLIAMS  
Assistant Vice President  
(Title)

12. 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.

13.  President & CEO  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. MICHAEL NAZARENKO  
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

OCTOBER 06, 1998

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

PENNSYLVANIA REGIONAL TISSUE AND TRANSPLANT BANK

is duly incorporated under the laws of the Commonwealth of Pennsylvania,  
and remains a subsisting corporation so far as the records of this office  
show, as of the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's  
Office to be affixed, the day  
and year above written.

A handwritten signature in cursive script, appearing to read "G. L. Kane".

Secretary of the Commonwealth

DPOS

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