

F9900000 2929
TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES LTD.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida",
"Certificate of Existence", and check are submitted to register the above referenced foreign corporation to
transact business in Florida.

Please return all correspondence concerning this matter to the following:

STAN RUBIN
(Name of Person)

RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES LTD.
(Firm/Company)

546 3 AVE SO. #4
(Address)

NAPLES FL 34102
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

200002887412--9
-05/26/99--01083--002
*****78.75 *****78.75

STAN RUBIN at (941) 659-1040
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☒ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

FILED
99 JUN -8 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
6-8-99



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 27, 1999

STAN RUBIN
543 3 AVE S
#4
NAPLES, FL 34102

SUBJECT: RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES
LTD.
Ref. Number: W99000012496

We have received your document for RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES LTD. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

A photocopy of the certificate of existence is not acceptable.

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) 487-6043.

Shawn Logan
Document Specialist

Letter Number: 599A00029382

FILED
99 JUN -8 PM12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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.*

1. RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES LTD.
(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. TAX ID - 65-0736890
(FEI number, if applicable)
4. 2/29/96
(Date of incorporation)
5. PERPETUAL
(Duration: Year corp. will cease to exist or "perpetual")
6. JAN. 2/99
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. P.O. BOX 153
NAPLES FL 34106
(Current mailing address)
8. PHARMACEUTICAL DISTRIBUTION
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)
Name: STAN RUBIN
Office Address: 546 3 AVE So. #4
NAPLES FL, Florida, 34102
(Zip code)

FILED
99 JUN -8 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(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.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: STAN RUBIN

Address: 546 3 AVE South, #4
NAPLES FL 34102

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: STAN RUBIN

Address: 546 3 AVE So, #4
NAPLES FL 34102

Vice President: _____

Address: _____

Secretary: STAN RUBIN

Address: 546 3 AVE So, #4
NAPLES FL 34102

Treasurer: STAN RUBIN

Address: 546 3 AVE So, #4
NAPLES FL 34102

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. STAN RUBIN, PRESIDENT & SECRETARY

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

FILED
99 JUN -8 PM 12:55
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES LTD." 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 MAY, A.D. 1999.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RUBIN-NEUDECKER MEDICAL RESEARCH LABORATORIES LTD." WAS INCORPORATED ON THE TWENTY-NINTH DAY OF FEBRUARY, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID IS THE TWENTY-FIFTH DAY OF MAY, A.D. 1999.



A handwritten signature in black ink, reading "Edward J. Freel".

Edward J. Freel, Secretary of State

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991207931

AUTHENTICATION:

9765007

DATE:

05-25-99