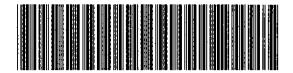
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(Requestor's Name)					
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SECRETARY OF STATE

MRP 3/13

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT:	CRI-MMRL,							
	(PROPOSED CORPORATE N	NAME – MUST INCLUD	e suffix)					
Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:								
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate I propaga PY REQUIRED					
FROM:								
Name (Printed or typed) 2150 Bleecker Street Address								
Utica, NY 13501								
City, State & Zip (315) 735-2217								
Daytime Telephone number								

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

ca@mmrl.edu

ARTICLES OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit)

FILED 13 NOV 12 PM 1: 49

ARTICLE I NAME
The name of the corporation shall be: CRI-MMRL, Inc.

SEGRETARY OF STATE

<u>ARTICLE II</u>	PRINCIPAL OFFICE		TALLAMASSE		
Maso	Principal <u>street</u> address: nic Medical Research Laboratory - c/o Grand Lodge	of Florida Ma	Mailing address, if different is: Masonic Medical Research Laboratory		
220	220 N. Ocean Street 2nd Floor		2150 Bleecker St.		
Jacksonville, FL 32202			Utica, NY 13501		
• •	or which the corporation is organized is:		n medical research institute laboratory in the State of Florida Igh quality basic and clinical research almed at generatin		
and information	necessary for development of the medical cures and tr	ealments of tomorro	w. The Cardiac Research Institute, Inc. is also committed	l to providing	
education and tra	alning to basic scientists, clinical researchers and stud	ents who will perpetu	ate and extend the fight egainst disease.		
,					
<u></u>					
ARTICLE IV	5) in number. They shall be elected at the ennual meet	ing . Said Directors :		the Corporation	
Name and Title	Edward S. Newsham, PhD, President	Name and Title	Anthony V. Boccaballa, PhD, JD, Chairman of the Board		
Address	63 Woodslde Avenue	Address:	16325 Golf Club Rd #213		
	Oneonta, NY 13820		Weston FL 33326		
Name and Titl	Arthur P. Fisch, Esq. , Vice-president 25 Joralemon Street Brooklyn, NY 14568	Name and Title Address:			
	9;				
Address					

Name and Title:		Name and Title:					
Address _		Address:	FILED				
			13 NOV 12 PM 1: 49				
-			SECRETARY OF STATE TALLAHASSEE, ELORIDA				
Name and Title;_		Name and Title:					
Address _		Address:					
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ARTICLE VI	REGISTERED AGENT						
The name and Fi	rida street address (P.O. Box NOT accep	table) of the registered agent is:					
Name;	Seth L. Rothstein, Esc	<u>uire</u>	•				
Address:	Address: Adams, Rothstein & Siegel, P.A.						
	4417 Beach Boulevard, St. 104						
	Jacksonville, Florida	32207					
	INCORPORATOR dress of the Incorporator is:						
Name:	Masonic Medical Research Laboratory						
Address:	2150 Bleecker Street						
	Utica, NY 13501						
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity							
(WH	Required Signature of Registered	Agent	November 5, 2013				
I submit this document and affirm that the facts stated herein are true. I am aware that any 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.							
Comme	S. Vacusham Cres Required Signature of Incorp	iclent	10/28/2013 Date				