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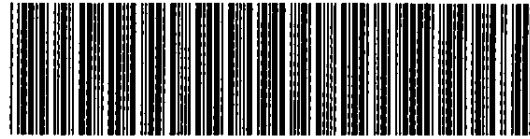
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12/17/13--01010--011 \*\*78.75

SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
13 DEC 17 AM 10:08

*[Handwritten signature]*  
12/17/13

## COVER LETTER

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

**SUBJECT:** National Institute for Scientific and Medical Advancement, Inc.  
(PROPOSED CORPORATE NAME – MUST INCLUDE 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

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: Hamisu M. Salihu  
Name (Printed or typed)

7903 Terrace Ridge Drive  
Address

Temple Terrace, FL 33637  
City, State & Zip

205-910-8720  
Daytime Telephone number

hamisu.salihu@gmail.com  
E-mail address: (to be used for future annual report notification)

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

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

**ARTICLE I    NAME**

The name of the corporation shall be: National Institute for Scientific and Medical Advancement, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address:  
7903 Terrace Ridge Drive

Temple Terrace, FL 33637

Mailing address, if different is:

RECEIVED  
SECRETARY OF STATE  
13 DEC 17 11:10:08  
TAMPA, FLORIDA

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: to advance scientific and medical knowledge through the use of science and technology products in an effort to improve health and narrow disparities.

**ARTICLE IV    MANNER OF ELECTION**

The manner in which the directors are elected and appointed: Appointed

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ronee Wilson, Executive Director

Address: 34506 Cliffcreek Court  
Wesley Chapel, FL 33545

Name and Title: Lindsey King, Director of Marketing and Finance

Address: 14223 Shadow Moss Lane Apt 202  
Tampa, FL 33613

Name and Title: Alfred Mbah, Director of Evaluation

Address: 9417 Lisbon Street  
Seffner, FL 33584

Name and Title: P. Amina Alio, Member

Address: 265 Crittenden Blvd  
Rochester, NY 14642

Name and Title: Muktar Aliyu, Member

Address: 2525 West End Ave, Suite 750  
Nashville, TN 37203

Name and Title: Boubakari Ibrahimou, Member

Address: 11200 S.W. 8th Street  
Miami, FL 33199

Name and Title: Maria Mainolfi, Member

Address: 1 Guthrie Square  
Sayre, PA 18840

Name and Title: Eknath Naik, Member

Address: 7317 Colonial Lake  
Riverview, FL 33578

Name and Title: \_\_\_\_\_

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

Name and Title: \_\_\_\_\_

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

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Hamisu M Salihu

Address: 7903 Terrace Ridge Drive  
Temple Terrace, FL 33637

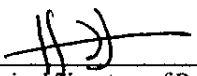
**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Hamisu M. Salihu

Address: 7903 Terrace Ridge Drive  
Temple Terrace, FL 33637

*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*

  
Required Signature of Registered Agent

12/09/2013  
Date

*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.*

  
Required Signature of Incorporator

12/09/2013  
Date