

P02000125361

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000230516 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0381

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

02 NOV 26 AM 9:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

FLORIDA PROFIT CORPORATION OR P.A.

REGENMED CORP.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

11/26

H020002305165

SECRETARY OF STATE
TALLAHASSEE FLORIDA

02 NOV 26 AM 9:41

FILED

**ARTICLES OF INCORPORATION
OF
REGENMED CORP.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation:

**ARTICLE I
NAME**

The name of the corporation is **REGENMED CORP.** (hereinafter called the "Corporation").

**ARTICLE II
PRINCIPAL OFFICE AND MAILING ADDRESS**

The initial principal office and mailing address of the Corporation is: c/o Dennis A. Steindler, 100 South Newell Drive, Gainesville, Florida 32610.

**ARTICLE III
CAPITAL STOCK**

The number of shares of stock that the Corporation is authorized to issue is Ten Million (10,000,000) shares, par value \$.001 per share, of common stock. Each issued and outstanding share of common stock shall be entitled to one vote on each matter submitted to a vote at a meeting of the shareholders.

**ARTICLE IV
INITIAL REGISTERED OFFICE AND AGENT**

The street address of the Corporation's initial registered office is 1201 Hays Street, Tallahassee, Florida 32301. The name of the Corporation's initial registered agent at that office is Corporation Service Company.

**ARTICLE V
INCORPORATOR**

The name and address of the incorporator of the Corporation is Mary V. Carroll, One S.E. 3rd Avenue, 28th Floor, Miami, FL 33131.

**ARTICLE VI
INDEMNIFICATION**

Any person made, or threatened to be made, a party to any threatened, pending, or contemplated action or proceeding, whether civil, criminal, administrative, or investigative, arising out of or related to such person's service as a director, officer, advisory board member, employee, or agent of the Corporation, shall be indemnified by the Corporation to the fullest extent permitted by applicable law, and the Corporation may advance to such person related expenses incurred in defense of such action, to the fullest extent permitted by applicable law.

(M1836242;1)

H020002305165

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation this November 25, 2002.



Mary V. Carroll, Incorporator

**CERTIFICATE OF ACCEPTANCE BY
REGISTERED AGENT**

Pursuant to the provisions of Section 607.0501 of the Florida Business Corporation Act, the undersigned submits the following statement in accepting the designation as registered agent and registered office of **REGENMED CORP.**, a Florida corporation (the "Corporation"), in the Corporation's articles of incorporation:

Having been named as registered agent and to accept service of process for the Corporation at the registered office designated in the Corporation's articles of incorporation, the undersigned accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent.

IN WITNESS WHEREOF, the undersigned has executed this Certificate this NOV. 25, 2002.

CORPORATION SERVICE COMPANY

By: Laura R. Dunlap
Name:

Laura R. Dunlap
as its agent

FILED
02 NOV 26 AM 9:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA