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COVER LETTER

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

SUBJECT:	BIODIAGNO:	stics.	JNC	
	(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)			
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00	₹ 78.75	<u> </u>	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee		
	& Certificate of Status	& Certified Copy		
			& Certificate of	
			Status	
	ADDITIONAL COPY REQUIRED			
			<u></u>	
EDOM.	Makas	1 Gat	Ž	
FROM:	Mane (Printed or typed)			
	6093 POINTE REGAL CIRCLE			
	DELARY BEACH. Klorion 33484			
	OELRAY BEACH, Klorias 33484 City, State & Zip			
		•		
561-865-0560 Daytime Telephone number				

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2006

MICHAEL L. GATZ 6093 POINTE REGAL CIRCLE DELRAY BCH, FL 33484

SUBJECT: BIODIAGNOSTICS INC. Ref. Number: W06000011590

We have received your document for BIODIAGNOSTICS INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the original and one copy of 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) 245-6933.

Letter Number: 106A00016440

Dale White Document Specialist New Filing Section

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

06 MAR 20 AM 9: 01

The name of the corporation shall be:

NAME

BIODIAGNOSTICS INC.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

6093 POINTE REGAL CIRCLE

DELRAY BEACH, ELORIDA 33484

ARTICLE III PURPOSE

ARTICLE I

The purpose for which the corporation is organized is:

SELL RAM MATERIALS FOR BIOTECH RESEARCH

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MICHAEL L. GATZ- PKESIDENT

6093 POINTE REGAL CIRCLE

DELRAY BEACH, FLORIDA 33484

ARTICLE VI REGISTERED AGENT

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

MICTORIA ENTRE REGAL CIRCLE 184 DELKAY BEACH, FLORIDA 33484

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL L. GATZ 6093 POINTE REEAL CINCLE

DELRAY BEACH, KRRIDA

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

Signature/Incorporator
