

P11000059838

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COVER LETTER

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

SUBJECT: **Advanced Imaging Projects, Inc**

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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 of
Status
ADDITIONAL COPY REQUIRED

FROM: **Rosanne Satz**

Name (Printed or typed)

10425 NW 37 Terrace

Address

Doral, FL 33178

City, State & Zip

305-468-9141

Daytime Telephone number

info@bionucleonics.com

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

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

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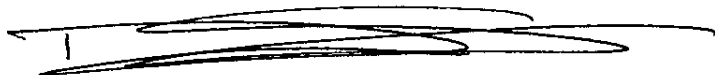
April 21, 2011

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SUBJECT: Advanced Imaging Projects, Inc.
Document Number: P07000059065

Advanced Imaging Projects, Inc. (Document Number P07000059065) is no longer in business. I am aware that the Company was administratively dissolved on 9/24/2010 for failure to file an annual report. The company has no intention of reinstating the name. I have no objection to the name being released for use by another entity.

Sincerely,



Rosanne Satz
President

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Advanced Imaging Projects, Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
10425 NW 37 Terrace
Doral, FL 33178

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any and All Lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 100,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rosanne Satz
Address: President
10425 NW 37 Terrace
Doral, FL 33178

Name and Title: _____
Address: _____

Name and Title: Stanley Satz
Address: Vice President & RSO
10425 NW 37 Terrace
Doral, FL 33178

Name and Title: _____
Address: _____

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: Rosanne Satz
Address: 10425 NW 37 Terrace
Doral, FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Rosanne Satz
Address: 10425 NW 37 Terrace
Doral, FL 33178

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]
Required Signature/Registered Agent

06/24/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

[Signature]
Required Signature/Incorporator

06/24/2011

Date