(Requestor's Name)
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 ", P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

wie

Account#: I20000000088

Date:	10/28/2019	
Name:	Marcel Ogbonna-Amı	<u>ı </u>
Reference #	1145877	
Entity Name	e:EF TI	HERAPEUTICS, INC
	les of Incorporation/Authoriz	
☐ Ame	ndment	
Char	nge of Agent	
Rein:	statement	
☐ Conv	version	
☐ Merg	ег	
☐ Disso	olution/Withdrawal	
☐ Fictit	ious Name	
☐ Othe	r	-
Authorized /	Amount:\$70.00	
Signature: _	11/18-0	

F: 800.944.6607

F: +852.2682.9790

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

ARTICLE I NAME

ARTICLE I NAME The name of the corporation	n shall be:	EF Therapeutics, Inc			
ARTICLE II PRINCIP	AL OFFICE				
109 W. F	ortune Street		PO Box 19406		
Tampa	, FL 33602	Raleigh, NC 27619			
approval of an e	E corporation is organized is: To purselectroporation device for dimmunotherapy and o	r use in ele	ctrochemotherapy, ger		
in th	ne United States and for	r worldwide	distribution.		
			SECKETALY LLAHASUM		
ARTICLE IV SHARES The number of shares of sto ARTICLE V INITIAL	ck is: 1000000		W. AHII: 25		
Name and Title:	Gary Strange,CEO	Name and Title:	Dr. Richard Heller, Chief Science Offic		
Address	PO Box 19406	Address:	109 W. Fortune St		
	Raleigh, NC 27619		Tampa, FL 33602		
Name and Title:	Mike Peebles,COO		Dr. Mark Jaroszeski,VP of Researc		
Address	10516 Neland Street	Address:	1721 Sassafras Drive		
_	Raleigh, NC 27614	-	Wesley Chapel, FL3354		
_		_			
Name and Title:		_ Name and Title:	·		
Address		Address:			
		_			

Name and	Fitle:	Name and Title:	
Address		Address:	
	<u>EGISTERED AGENT</u> rida street address (P.O. Box NOT acceptable) o	Ethe registered agant is:	
Name:	COGENCY GLOBAL INC.	The regimered agent is.	
Address:	115 North Calhoun Street, Suite 4	-	
-	Tallahassee, FL 32301	•	
ARTICLE VII IN	CORPORATOR		
The name and add	ress of the Incorporator is:		
Name:	Gary Strange		
Address:	PO Box 19406	_	
	Raleigh,NC 27619	-	
Effective date, if other	FFECTIVE DATE: her than the date of filing: e is listed, the date must be specific and canno	. (OPTIONAL) t be more than five days p) rior or 90 days after the
	serted in this block does not meet the applicable ctive date on the Department of State's records.	statutory filing requirements	s, this date will not be listed as
	d as registered agent to accept service of process familiar with and accept the appointment as reg		
Menut W	alker, Asst. Secretary		10.18.2019
	Oalker, ASSt. Secretary Required Signature/Registered Agent		10-18-2019 Date
	nent and affirm that the facts stated herein are partment of State constitutes a third degree felon		
Gar	y Strange I Signature Incorporator		10/24/2019
Requise	d Signature/Incorporator		Date

COVER LETTER

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

SUBJECT:	EF Therapeutics, Inc			
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:	
\$70.00 Filing Fee	■ \$78.75Filing Fee& Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	→ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	

FROM:	Gary Strange
	Name (Printed or typed)
	PO Box 19406
	Address
	Raleigh, NC 27619
	City, State & Zip
	252-315-1971
	Daytime Telephone number
	gary@geihc.com
	E-mail address: (to be used for future annual report notification)

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