

TRANSMITTAL LETTER

P970000034437

Department of State  
Division of Corporations  
P. O. Box 6827  
Tallahassee, FL 32314

900002144769--4  
-04/16/97--01045--012  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: Astral Technologies, 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

☐ \$78.75

☐ \$122.50

☐ \$131.25

FROM: Gary Traub, Ph. D.  
Name (printed or typed)

50 East Sample Road, Suite 300

Address

Pompano Beach, FL 33064

City, State & Zip

954/ 783-5100

Daytime Telephone number

FILED  
97 APR 16 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 17 11:55B

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

**ARTICLES OF INCORPORATION**  
**OF**

**FILED**  
97 APR 16 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Astral Technologies, Inc.

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

**ARTICLE I NAME**

The name of the corporation shall be:

Astral Technologies, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

50 East Sample Road, Suite 300  
Pompano Beach, FL 33064

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Hundred (100)

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

Gary Traub, Ph. D.  
50 East Sample Road, Suite 300  
Pompano Beach, FL 33064

**ARTICLE V INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Gary Traub, Ph. D.                      President  
50 East Sample Road, Suite 300  
Pompano Beach, FL 33064

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

10<sup>th</sup> day of April, 1997.

  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Articles of Incorporation  
Filing Fee - \$35**

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Astral Technologies, Inc.

2. The name and address of the registered agent and office is:

Gary Traub, Ph. D.

(Name)

50 East Sample Road, Suite 300

(P.O. Box ~~not~~ acceptable)

Pompano Beach, FL 33064

(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

*GBT*, Ph.D.  
(Signature)

4-10-97

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA