

TRANSMITTAL LETTER

99000038109

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 APR 23 PM 2:14

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

SUBJECT:

HealthWave Therapeutics, Inc.  
(Proposed corporate name - must include suffix)

400002849734--1  
-04/23/99--01085--009  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed is 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:

Thomas W. Laputka  
Name (Printed or typed)

345 N. OAK Ave.  
Address

Orange City, FL 32763  
City, State & Zip

(904) 775-2832  
Daytime Telephone number

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

D. BROWN APR 27 1999

## ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

The name of the corporation shall be: *HealthWave Therapeutics, Inc.*

### ARTICLE II PRINCIPAL OFFICE

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

*345 N. Oak Ave.  
P.O. Box 140128  
Orange City, FL 32774-0128*

### ARTICLE III SHARES

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

*200,000*

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

*Thomas W. Laputka  
345 N. Oak Ave  
Orange City, FL 32763*

### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

*Thomas W. Laputka  
345 N. Oak Ave  
Orange City, FL 32763*

  
Signature/Incorporator

*APRIL 21, 1999*  
Date

(An additional article must be added if an effective date is requested.)

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

  
Signature/Registered Agent

*APRIL 21, 1999*  
Date

FILED STATE  
SECRETARY OF CORPORATIONS  
99 APR 23 PM 2:15