UNOFFICIAL COPM680341

File Number 5741-108-2

4164/0006 15 005 Page 1 of 2000-09-01 09:27:05 Cook County Recorder



COOK COUNTY RECORDER **EUGENE "GENE" MOORE ROLLING MEADOWS**

Office of The Secretary of State Corporation Tilling

Whereas.

C-212.3

INCORPORATED UNDER THE LAWS CO THE STATE OF ILLINOIS HAS BEEN FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE BUSINESS CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

Now Therefore, I, Jesse White, Secretary of State of the State of Illinois, by virtue of the powers vested in me by law, do hereby issue this certificate and attach hereto a copy of the Application of the aforesaid corporation.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, at the City of Springfield, this

JANA C

day of AUGUST A.D. 2000 and of the Independence of the United States the two hundred and 25TH

Desse White

Secretary of State



Form BCA-12.45/

13.60

DOMESTIC OR FOREIGN CORPORATIONS

(Rev. Jan. 1999)

Jesse White Secretary of State Department of Business Services Springfield, IL 62756 http://www.sos.state.il.us

Payment must be made by certified check, cashier's check, Illinois attorney's check, Illinois C.P.A.'s check or money order, payable to "Secretary of State."

This space for use by secretary of State

AUG 1 8 2000

JESSE WHITE SECRETARY OF STATE File # D5741-108-2

SUBMIT IN DUPLICATE!

This space for use by Secretary of State

Date

8-18-00

Filing Fee

\$ 100.00

Approved:

1.	(a)	Corporate name as of the date of issuance of the certificate of dissolution or revocation: BioSafe Diagnostics Corporation
	(b)	Corporate name as changed:
		(Note 1)
	(c)	If a foreign corporation having a certificate of authority under an assumed corporate name restriction, the
		assumed corporate name:
2.	Stat	e of incorporation: <u>Illinois</u>
3.	Date	that the certificate of dissolution or revocation was issued: Au aust 9,2000
4.	3) N	re and address of the Illinois registered agent and the Illinois registered office, upon reinstatement: (Note OTICE! Completion of item #4 does not constitute a registered agent or office change. See note #3 on a of this form. Registered Agent David C. Fleisner First Name Middle Name Last Name
5.	This licen	application is accompanied by all delinquent report forms together with the filing fees, tranchise taxes, se fee and penalties required.
3.	affirn	undersigned corporation has caused this statement to be signed by its duly authorized officers, each of whom as, under penalties of perjury, that the facts stated herein are true. (All signatures must be in BLACK INK .)
		d August // 16 , 2000 BIOSAFE Diagnostics Corporation (Exact Name of Corporation) ted by (Signature of Secretary or Assistant Secretary) Alan R. Musholt Assistant Jeffrey G. Pierracci Vice-President
		(Type or Print Name and Title) Secretary Type or Print Name and Title)