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| Certified Copies | _ Certificate | s of Status | |
| Special Instructions to Filing Officer: | | | |
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SECRETARY OF STATE
TALLAHASSEE, FINALE

Lawers MAY 28 200 2 2147 CC

COVER LETTER

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

| SUBJECT: | Rosetta Gen (PROPOSED CORPORA | TENAME- <u>MUSTINCL</u> | UDE SUFFIX) | _ | |
|----------------------|---|---|---|-----------------------|-----------------|
| Enclosed are an orig | ginal and one (1) copy of the artic | les of incorporation and | a check for: | | |
| \$70.00 Filing Fee | XI \$78.75 Filing Fee & Certificate of Status | S78.75 Filing Fee & Certified Copy ADDITIONAL CO | S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | | |
| FROM: | | Printed or typed) | 1.1.0. | | |
| | 3711 Marke | Address S | ouite 19 GAS | 2009 M | Milet Transport |
| | Philadelphia, (| PA 19104 State & Zip | HASSEE | AY 27 | |
| | 215-382-91 | · | Y OF STATE EE. FLORIDA | 2009 MAY 27 PM 12: 03 | EO |

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

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. ienomics (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) State of Deliverse USA
(State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) 5. Per (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Current mailing address) ose(s) of corporation authorized in home state or country to be carried out in state of Fjorida) residents file street address of Florida registered agent (DO Barried and 1111) State of Florida 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NRAI Services Inc. Name: 2731 Executive Park Dr. Suite 4 Office Address:

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

NRAI Services, Inc.

(Registered agent's signature)

alt / nampon

Matt Thompson, Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

| A. DIRECTORS | | | |
|---|---|----------------|----------|
| Chairman: | | | |
| Address: | | | |
| | <u> </u> | | |
| Vice Chairman: | | | |
| Address: | | | |
| Director: M. your chelouch | L | | |
| Address: 10 Plant Street | | | |
| Rehovot, Israel 7678 | 06 | | <u>-</u> |
| Director: | <u>></u> | <u> </u> | • |
| Address: | | OS HAY | dere |
| | | ₹ ₹ | |
| B. OFFICERS | , in | 7 P | r |
| President Anne Avnel | FLOR | PH Z | ζ |
| Address: 110 W 90th Street | 5,4/= BA | 03 ME | |
| New york, NY 1002 | <i>A</i> | | |
| huel Commercialyalia Roven Tax | nw | | |
| Address: 56 A Demolt Stre | et | | |
| Tenafly NJ0767 | Ø | | |
| set Swentifice officer palia Cohen, | PR.D | | |
| Address: 170 Mt. Verno | n street | , | |
| Freedurge VP Massed Haider | + 0/890 -PL:D | | |
| Address: 9 Halhaway Dr | | | |
| Princeton Inct N | T08530 | | |
| NOTE: If necessary, you may attach an addendum to the | application listing additional officers and/or di | rectors. | |
| 13. Masmelfonder | | | |
| (Signature of Director or Officer list Executive Vice Presider | / · 1 —— — 1 | 11 | m.l. |
| 7.000 | ity of person signing application) | <u>- 0 /02</u> | S CALKE |

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THAT "ROSETTA GENOMICS INC." IS DULY
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING
BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE
SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF INCORPORATION, FILED THE TWENTY-FIRST DAY OF APRIL, A.D. 2005, AT 5:25 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID CORPORATION, "ROSETTA GENOMICS INC.".

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTED BEEN FILED TO DATE.

CRETARY OF STATE

FILED

3958803 8310

090337887

Jeffrey W. Bullock, Secretary of State

AUTHENT\CATION: 7230088

DATE: 04-06-09

You may verify this certificate online at corp. delaware. gov/authver. shtml