



COMMONWEALTH OF KENTUCKY
ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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mstratton
NAOI

Alison Lundergan Grimes
Kentucky Secretary of State
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Division of Business Filings
Business Filings
 PO Box 718
 Frankfort, KY 40602
 (502) 564-3490
 www.sos.ky.gov

Articles of Incorporation
Non-profit Corporation

NAI

Please note: This form does not comply with 501 (C) status. You should contact the Internal Revenue Service prior to filing the Articles of Incorporation.

Pursuant to KRS 14A and KRS 273, the undersigned applies to qualify and for that purpose submits the following statements:

Article I: The name of the corporation is American Society for Exosomes and Microvesicles, Inc

Article II: The purpose for which the corporation is organized to provide educational meetings and scientific activities

Article III: The name of the registered agent is Douglas D. Taylor

and the street address of the corporation's initial registered office in Kentucky is

| | | | |
|--|-------------------|--------------|-----------------|
| <u>3209 Trail Ridge Road</u> | <u>Louisville</u> | <u>KY</u> | <u>40241</u> |
| Street Address (No Post Office Box Numbers) | City | State | Zip Code |

Article IV: The mailing address of the corporation's principal office is

| | | | |
|--------------------------------|-------------------|--------------|-----------------|
| <u>3209 Trail Ridge Road</u> | <u>Louisville</u> | <u>KY</u> | <u>40241</u> |
| Street or PO Box Number | City | State | Zip Code |

Article V: The number of directors (minimum of three (3) required) constituting the initial board of directors is 4

The names and mailing addresses of the persons who are to serve as the initial board of directors are as follows:

| | | | | |
|----------------------------|--------------------------------|-------------------|--------------|-----------------|
| <u>Douglas Taylor</u> | <u>3209 Trail Ridge Road</u> | <u>Louisville</u> | <u>KY</u> | <u>40241</u> |
| Name | Street or PO Box Number | City | State | Zip Code |
| <u>James Munhall</u> | <u>776 Notchbrook Drive</u> | <u>Delaware</u> | <u>OH</u> | <u>43015</u> |
| Name | Street or PO Box Number | City | State | Zip Code |
| <u>Stephen Gould</u> | <u>725 N. Wolfe Street</u> | <u>Baltimore</u> | <u>MD</u> | <u>21205</u> |
| Name | Street or PO Box Number | City | State | Zip Code |
| <u>Cicek Gercel Taylor</u> | <u>3209 Trail Ridge Rd</u> | <u>Louisville</u> | <u>KY</u> | <u>40241</u> |

Article VI: The name and mailing address of the incorporator is

| | | | | |
|----------------------------|---|-------------------|--------------|-----------------|
| <u>Cicek Gercel Taylor</u> | <u>3209 Trail Ridge Road</u> | <u>Louisville</u> | <u>KY</u> | <u>40241</u> |
| Name | Street Address or Post Office Box Number | City | State | Zip Code |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Name | Street Address or Post Office Box Number | City | State | Zip Code |
| <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Name | Street Address or Post Office Box Number | City | State | Zip Code |

Article VII: This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is _____

(Delayed effective date and/or time)

I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

| | | |
|----------------------------------|--------------------------------------|-----------------|
| <u></u> | <u>Cicek Gercel Taylor, Director</u> | <u>02/14/12</u> |
| Signature of Incorporator | Print Name & Title | Date |

I, Douglas Taylor, consent to serve as the registered agent on behalf of the corporation.
Print Name of Registered Agent

| | | |
|--------------------------------------|---------------------------------|-----------------|
| <u></u> | <u>Douglas Taylor, Director</u> | <u>02/14/12</u> |
| Signature of Registered Agent | Print Name & Title | Date |