BEFORE THE
DIVISION OF SECURITIES
DEPARTMENT OF FINANCIAL INSTITUTIONS
STATE OF WISCONSIN

In the Matter of
MED-LINK INTERNATIONAL, INC.,
Respondent.

WAIVER AND CONSENT
TO ORDER

File No. 5-02050(EX)

The undersigned Respondent, having decided not to contest the issuance of the attached Order, hereby waives its right to a hearing with respect to this matter and hereby consents to the issuance of the Order;

The undersigned Respondent understands that the Order is effective when signed by the Administrator of the Division of Securities and that a willful violation of an Order signed by the Administrator is a criminal offense.

EXECUTED this ___ day of ______________, 2002.

MED-LINK INTERNATIONAL, INC.

by __________________________

(Type name and title)

State of
County of

Subscribed before me this

___ day of ______________, 2002.

Notary Public____________________

My commission expires____________________
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California
County of Orange  

On August 12, 2002, before me, Steven F. Schroeder
personally appeared Michael F. DiBiase

☑ personally known to me
☑ proved to me on the basis of satisfactory evidence

☐ to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in ☐ their authorized capacity(ies), and that by ☐ their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

STEVENV F.SCHROEDER
Commission #1381319
Notary Public - California
Orange County
My Comm. Expires Oct 21, 2004

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document
Title or Type of Document: Waiver and Consent to Order

Document Date: _______________ Number of Pages: ___

Signer(s) Other Than Named Above: Michael F. DiBiase

Capacity(ies) Claimed by Signer
Signer's Name: Michael F. DiBiase
☐ Individual
☑ Corporate Officer — Title(s): President
☐ Partner ☐ Limited ☐ General
☐ Attorney in Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _______________

Signer is Representing: ____________________________