## LETTER OF TRANSMITTAL

Corporate Stock Transfer, Inc. 3200 Cherry Creek Drive South, Ste. 430 Denver, CO 80209 303-282-4800 Fax 303-282-5800

The Board of Directors of **SKYLINE MEDICAL, INC.** (the "Company") has approved a reincorporation merger. The company will be forming a Delaware subsidiary and will merge the Minnesota company into the Delaware company. The effective date was December 18, 2013.

**This is a MANDATORY exchange.** Prior to any trading activity, you must exchange your old certificate(s) for a new certificate(s) reflecting the reincorporation merger. Please complete the following and forward it attached to your certificate(s) to Corporate Stock Transfer, Inc. at the above address. We recommend that you send your certificate(s) via certified mail. *There is a transfer fee of \$35.00 (US) plus a \$7.00 (US) certified mail fee to forward the new certificate back to you if you reside in the United States, for a total of \$42.00 (US dollars). If you are a "foreign" shareholder, we recommend including PRE-PAID overnight courier airbill for sending the new certificate back to you by overnight courier, plus the \$35.00 transfer fee. Please include the \$42.00 fee for US or \$35.00 and a PRE-PAID courier airbill for foreign status, made payable to Corporate Stock Transfer, with your paperwork.* 

**Please note:** any shareholders that have electronic shares will **not** have to make the transfer as this will be handled by the responsible body that transmits electronic shares.

| 1) | Name/ Address  | 2) | Certificate # | Shares |
|----|--|----|---------------|--------|
|    |  |    |               |        |
|    |  |    |               |        |
|    | A) Social Security or Tax ID Number:                         |    |               |        |
|    | B) Phone number (for transmittal purposes only)              |    |               |        |
|    | C) Email contact (for transmittal purposes only)             |    |               |        |
|    | D) Payment by Check (please provide check number and amount) |    |               |        |
| 3) | SPECIAL MAILING INSTRUCTIONS:                                |    |               |        |
|    | To: (name/address):  |    |               |        |
|    | ×  |    |               |        |

## **INSTRUCTIONS:**

- 1) Enter your current address and indicate if this is a change of address.
- 2) Enter your certificate number(s) and corresponding number of shares represented by each certificate. Please provide phone/email contact and appropriate funds for transfer fees.
- 3) Special Mailing Instructions: Indicate the address to which you desire the replacement certificate(s) mailed. Note: Please do not complete this section if you wish to have the certificate(s) returned to your present address as indicated in Section 1 above.
- 4) There is no need to endorse your certificate(s), as there will be no change in registration.
- 5) Include your payment for transfer/mailing fees, made payable to Corporate Stock.