Health Infrastructure for Critical Objects (HeICO)

For health care

DISCLAIMER

- The present document and the information herein contained are strictly confidential and only to be used by the subjects to whom such presentation is addressed for purposes of analysis and project preliminary evaluation.

- Data, information, assumptions, assessments and projections contained in this presentation cannot be used for any use other than the one intended or, without the previous written approval of Digital Atmosphere SRLS. They cannot be sent to third parties, brought up or forwarded (if not required by force of law or regulations in force), presented, read or reproduced in any form.

- Digital Atmosphere SRLS, despite a careful analysis of such information and a rigorous assessment of what can arise from them, does not give any guarantee on the information herein provided and is not accountable for the completeness, accuracy, reliability of such information.

- The present section of document does not represent a business proposal, a public offer or a binding offer, and it is not meant to close or sign any business deal nor lead to it.

- Data, information, assumptions, assessments and projections contained in this presentation shall not be binding for Digital Atmosphere SRLS or its related companies and shall not be suitable to generate for them binding commitments or responsibilities of any type towards the recipients of such document, including possible subjects interested in carrying on business relations with Digital Atmosphere SRLS or its related companies.

- The delivery and examination of the present document reflects acceptance of the aforementioned rules and limitations.

OVERVIEW - 1/2

The CI (Critical Infrastructure), despite the specificities deriving from their different functions (think of critical infrastructures in different sectors such as energy, transport and specifically health services), are structured in systems of interconnected networks which show a series of common characteristics.

Until a decade ago, each of the information infrastructures could be considered as a substantially independent autonomous system, managed by vertically integrated operators. For a series of reasons, this structure has profoundly changed to the point that more and more the various infrastructures tend to be interdependent, above all due to the sharing of the so-called cyberspace, i.e. the virtual space produced by the interconnection of computers, telecommunications systems, applications. and data. This means that a failure (of an accidental or malicious nature) in one of these infrastructures can easily spread, with a domino effect, to other infrastructures, amplifying its effects and causing malfunctions and malfunctions even to remote users, both from a geographical and a geographical point of view.

The current scenario in the healthcare sector is therefore characterized by the growing need to have a digital repository on the one hand and on the other hand that each customer is equipped with a basic set of information that accompanies him and is unequivocally associated with it, in the form of portable electronic folder, integrated with a wallet in token to access to services of interest.

OVERVIEW - 2/2

In this infrastructural scenario, profound changes are also taking place which push the various infrastructures to provide innovative services with extremely high quality levels and at the same time impose stringent constraints on the characteristics of efficiency and cost-effectiveness of the same. This requires an optimal exploitation of the various regional, country and EU technological infrastructures which can only be obtained through a massive adoption of sophisticated automatic control systems and, more generally, use of ICT (Information and Communication Technology) technologies

This scenario is part of the present project which intends to create a service-oriented platform (web services and mobile app) which integrates blockchain technologies, IoT (Internet of Thigs), Artificial Intelligence and Complexity Theory for DSS (Decision Support System) for clients management, for Pharmacies and products/services management, for clinic, healthcare structures and hospitals governance.

In 2018, in the 27 EU member countries (thus not taking into account the UK, which came out as a result of Brexit), an average of 9.87% of gross domestic product was spent on health care. Outside the EU, Switzerland has spent the most healthily, with an 11.9% share of GDP and a per capita expenditure of €8327. Germany is the largest share of health spending, above the European average, in the EU, with spending 11.5% of gross domestic product. Germany also recorded the fourth per capita expenditure on health care, with EUR 4627 per inhabitant.

With regard to the drug market as early as 2016 for the five-year period 2015-2020, the global pharmaceutical market was expected to grow by between 4 and 7 percentage points, with a total market value in 2020 of 1400 billion dollars.

COMPETITORS AND COOPERATORS - 1/2

The HeICO collects several of the topics dealt with individually or in groups from different projects in a single solution that aims to meet the following needs:

- Implementation of a blockchain solution that can be integrated into a token ecosystem with a specific token for activities in health sector;
- Facilitation of transactions even at low or in the absence of liquidity thanks to the use of the token;
- Improving the competitiveness of companies thanks to the cost's amortization;
- Creation of an international showcase for HeICO members thanks to an existing ecosystem currently operating in more than 20 countries, both European and non-European (see section on dissemination of results for the complete list);
- Creation of a network of companies in a cooperative and competitive perspective in order to be more effective on the market not only locally, but above all national and international;
- Development of assistance systems and automatic diagnostics of vital parameters and personal well-being with low or zero invasiveness and / or remotely;
- Development of object recognition and tracking systems and aids to movement and orientation of the elderly and the disabled;
- Development of screening, alarm, call, communication, emergency management systems;
- Realization of an advanced solution for both customers and pharmaceutical operators, herbal operators and complementary care, health and well-being.

COMPETITORS AND COOPERATORS - 2/2

Below we list the different projects which now seem closer to our project, to grasp the characteristics, so that clearly emerge the value of the project that we present through the final summary of this section in which we list the CSF.

CoinHealth	Mhealthcoin	Healthcoinplus
Clinicoin	Universal Health Coin	Solve.Care
Medicalchain	MediBloc	FarmaTrust
Lympo	HUM	AI super doctor (AIDOC)

THE OPPORTUNITY: HEALTH INFRASTRUCTURE FOR CRITICAL OBJECTS

Interest in Information and Communication Technologies for human monitoring, smart health and assisted living is growing due to the significant impact that these technologies are expected to have on improving the quality of life of ageing populations around the world.

Information & Communication Technology offers various ways to improvise the Healthcare system. The healthcare field has to use ICT more intelligently to bring in more changes and elevate the healthcare to a much higher level which is important for the country's development.

The application of blockchain in healthcare is nascent; nevertheless, early solutions shown the potential to reduce healthcare costs, streamline business processes, and improve access to information across disparate and diverse stakeholders working toward a common goal.

The scope of blockchain technology in healthcare is immense. This is supported by a report which says that the global blockchain development technology in healthcare was valued at approximately $34.47 million and we will see a steep rise in 2024 with revenue close to $1415.59 million.

Blockchain is gaining traction as a tool that could help solve some of the healthcare industry's age-old problems that have resulted in wasteful spending and higher costs for providers, insurers and patients. Once-reluctant competitors are joining forces to find out just what the technology can do and in the process are developing new transparent business models. They anticipate that blockchain will be the key that unlocks barriers to healthcare data-sharing and ultimately enables an industrywide shift to value-based care.

THE CONCEPTUAL SOLUTION

Introducing HeICO - Health Infrastructure for Critical Objects, we realize a platform that aims at prevention, well-being and health by offering just in time services dedicated to blockchain Community and not only since anyone will have the opportunity to participate, like as single person, industry, company. Everybody, regardless of their financial possibilities, should have a place in the world and enjoy its benefits.

HeICO uses the blockchain technology to ensure improvements in health sector, with a particulat attention on activites that aim at health, medical and drugs/natural medicine services. We imagine a world where people can participate on activities in health sector with no need for lawyers or authorities to be registered but at the same keeping a universally recognized right on the purchase, health, care, etc. We put at your attention a new scenario where huge health projects can be owned by everybody and not just restricted groups.

We propose a scenario where ordinary people, indeed, everyone can have in its own portfolio a digital token directly connected to certified activities assets with a small initial investment and in proportion with the capabilities of each person. In this way, HeICO allows everyone to take a profit from the token appreciation together with asset income.

The use of certified activities in health sector combined with token generation, properly managed by a mining modulation system, obtains the maximum use of the certified activities.

SUMMARY – 1/2

Distinctive elements:

• the first fully transparent certified activities in blockchain with a particular attention on the health sector.

• in our team in the context of health and medical sectors, there are specific skills and abilities of working and at the same time the legal, economic, managerial, finance, and IT skills which are required for a good development of the project.

Here we list some details in brief:

1. Token: Health Infrastructure for Critical Objects (HEC)
2. Company name: HeICO Srl
3. Initial reserve: 100 Million HEcs, with specific allocation as described below
4. Minimal size from 100 Eur (if purchase is made by bank transfer) or 50 Eur (if purchase is made by other cryptos)
5. Ethereum based smart contract which stores all transactions
6. Buy and sell on most exchanges
7. Pay for renting or buying properties in Atmosphere Arc ecosystem solutions associated with HECs
8. Get a share of profits automatically as new HECs comes
9. Plus, profit on token appreciation!
10. Token issuance backed by real and certified credits.

SUMMARY – 2/2

The tokens will be generated thanks to the activities carried out by the project and the certified activities in health and medical, drugs sectors. Initially a small portion of tokens will be distributed to the companies of the trial group in exchange for direct production to be distributed to potential investors who will purchase discounted tokens.

You will be able to trace the life cycle of the energy thanks to the Blockchain transactions.

This will allow the Health Infrastructure for Critical Objects project to take further advantage in visibility and enhancement of lifestyle and medical services in a generalized offering that concerns different fields and not just health such as: personal care, food, care of environment, etc.

The token can be exchanged between producers, local production realities and in exchange for products and services in a perspective similar to a letter of credit or an innovative barter reviving the local economy;

Subsequently, Health Infrastructure for Critical Objects will be able to promote for the international network by acquiring resources for local associates by promoting the local production network in exchange for their products/services.

Products purchased from Health Infrastructure for Critical Objects will be advertised increasing competitiveness in an international context.

Health Infrastructure for Critical Objects

For investors

ECONOMICAL FOCAL POINT

- The activities based on blockchain, the issuance of coin or digital token, guaranteed by a collateral, the model to finance the start up are growing exponentially and to date they have not yet realized the real potential and reached full maturity. In fact, in a short time, the blockchain will have all the commodities and utilities for their development.

- This project aims at a specific utility: prevention, well-being and health by offering just in time services, for diagnostics, treatments, medical advice, health services, care services, pharmacology, food integration and nutrition. The focal point is the bound between token production, health and the provision of services.

MINING OF HEC – 1/2

- In the case of HeICO we are talking about an hybrid mining: both physical and classical computational mining with ASICs, the consumption profile is in fact built to chase the photovoltaic source without compromising the utility of consumption itself. Innovation is precisely in the nature of the work, which more time works and produces more useful: mining.

- The produced profit is further amplified by the withdrawal of the heat they generate. The latter is "virtuously" used for the certified activities. The mining machines will be miner at state of art (for example at the moment Antminer S19 Pro) which can resolve the SHA256 algorithm.

- So, HeICO will implement the same algorithm in order to be mined by those machines. Therefore, the HeICO is linked to a real productive activity as well which is associated with a benefit (the token) in relation to specific and planned actions aimed at achieving a specific task, which from the relative point of view is within the process of the certified activites in health sector.

MINING OF HEC – 2/2

The different operational macro-tasks and therefore the different ways to generate HeICO-type tokens are presented here in the following:

- MT1. Reporting of the production packages;
- MT2. Package analysis;
- MT3. Evaluation by Due Diligence of the value of the packages;
- MT3.1 Evaluation of efficiency of mine in terms of certified activities;
- MT3.2 Evaluation of risks;
- MT3.3 Evaluation of production activities;
- MT4. Inclusion of the area in the Health Infrastructure for Critical Objects Platform;
- MT5. Promotion and implementation of actions and interventions aimed at the production;
- MT6. Promotion and implementation of economic and legal initiatives and interventions aimed at the exploitation;
- MT7. Promotion and implementation of interventions aimed at processing and utilization of derived from production;
- MT8. Organization of promotional, cultural, social and marketing initiatives related to HeICO;
- MT9. Quarterly reports (monthly notes).

HEICO TOKENS DISTRIBUTION RULES AND TRANSPARENCY – 1/5

Here we describe the fundamental rules of HeICO Tokens distribution.

1. HECs can be emitted only if there is a proof of stack, with the exception of pre-sale since they serve to cover the startup and they will be covered by the first round of activities linked to the project technological and conceptual infrastructure;

2. HECs can be transferred by their owners to whoever they want.

3. HECs is not implementing any fee for blockchain transfers, but senders/buyers will have to pay the standard ETH transaction fee as they would do for any other token transfer based on the ETH blockchain. This fee is not related to and controlled by HECs;

4. HECs stored on the board of directors' accounts are locked: i. Each account contains a different number of tokens, as detailed at the moment of subscription; ii. Each account is unlocked after one year from the publication of the smart contract on the blockchain; this rule is enforced by the smart contract; iii. Each account can release alpha tokens according to the following mathematical rule:
   alpha = Token_Sold_To_Public/ (0,75) B * Director_Assigned_Tokens, with B=100.000.000
   iv. Board of directors' accounts are communicated immediately at the moment of subscription

HEICO TOKENS DISTRIBUTION RULES AND TRANSPARENCY – 2/5

5. HECs price is fixed at the pre-sale time 1 Eur = 1 HeICO

6. HECs price will change on future emissions;

7. Minimum purchase by FIAT currencies is set at 100 Eur;

8. Conversion rate, applied to calculate the amount of HECs issued, is the one existing at the time HECs receives the paid amount.

9. Minimum purchase by ETH, BTC is set 50 Eur: i. Sending ETH or BTC to the company account will cause the system to check the cross ETH/EUR or BTC/EUR price and release an equivalent amount of HeICO; ii. ETH/EUR price is checked every 1 minute, before the exchange phase while later you can follow the market tick; iii. If the amount of ETH sent to the company account is less than the amount needed to buy 1 HEC, the transaction is declined and the amount, deducted of the ETH fees, returned to the user; iv. As usual the only fee users will incur to buy and transfer HECs is that implemented by ETH itself, which is not related to and collected by Health Infrastructure for Critical Objects.

10. Pre-sale terminates when HECs on the company account are sold out or after six months from the starting date the pre-sale or as indicated on the web portal of the project;

HEICO TOKENS DISTRIBUTION RULES AND TRANSPARENCY – 3/5

11. Project share quota are divided and shares proportionally with HECs owners in the form of HECs. HECs are shared automatically to HECs owners on the exact date and time of HECs distribution which will be announced from time to time on the website; i. Project share quota are calculated taking into account the income generated by HeICO Project; ii. Project share quota might be distributed or not distributed, according to HEC appreciation.

12. HECs which are not acquired into pre-sale phase will be destroyed.

13. HECs held by users can be controlled only by their respective owners. Nobody at HeICO project can lock, destroy, transfer, recover password, secret keys, or interfere in any way with users' HECs;

14. During the normal activity after pre-sale phase, HECs which are not sold will not be destroyed, while they can be used in any time by the HeICO project; HECs will produce a proportional reduction of next emission or the reacquisition of HECs;

15. HECs are not company shares: consequently, do not guarantee to users vote for decisions

HEICO TOKENS DISTRIBUTION RULES AND TRANSPARENCY – 4/5

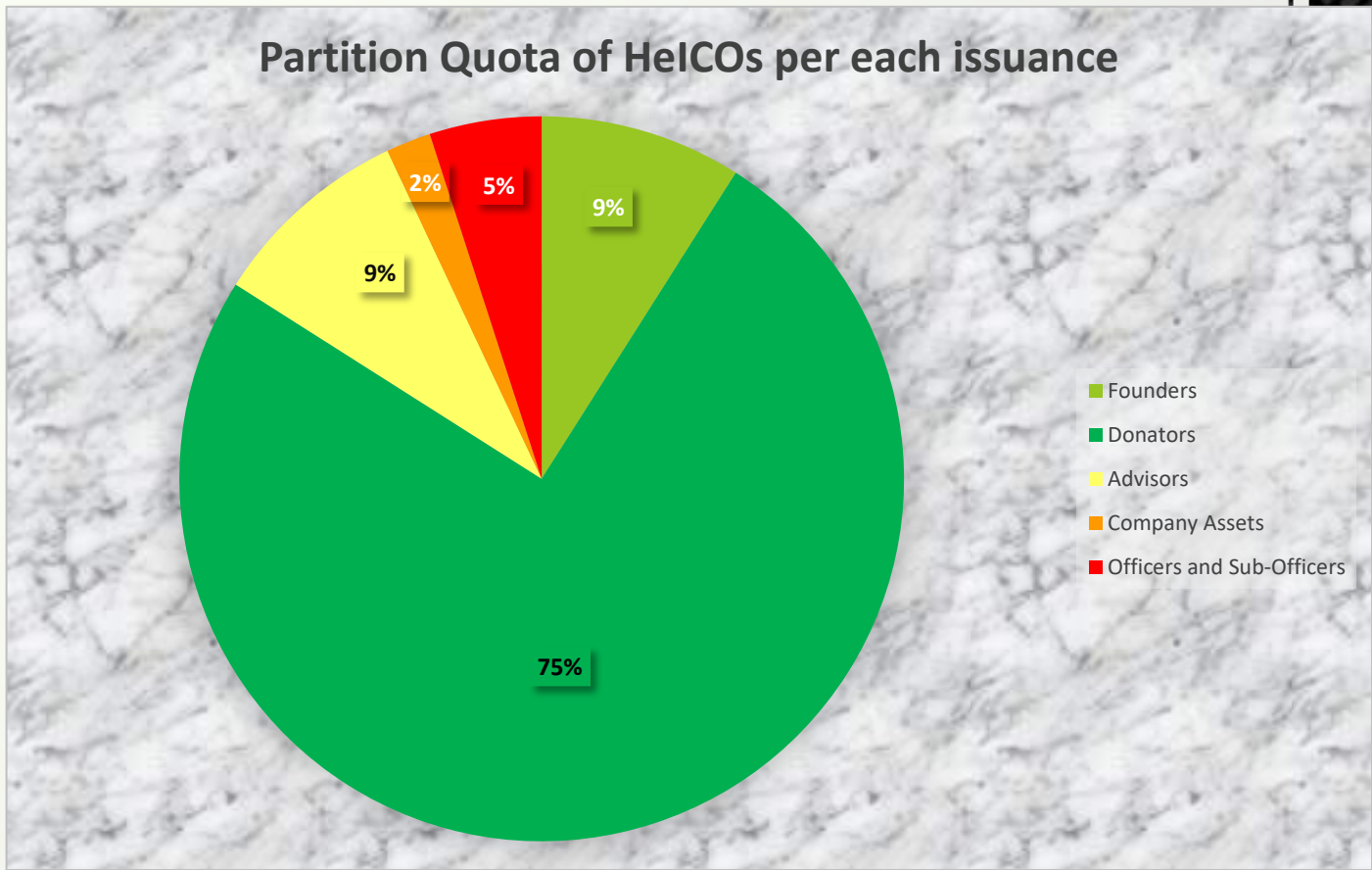
In the different emissions the HECs are divided according to the following algorithm:

Q1. Founders: 9%
Q2. Investors/Donators: 75%
Q3. External Advisors: 9%
Q4. Company Assets: 2%
Q5. Company Officers: 5%

Q4 is a portion that has the role of performing a compensation function in the event of anomalous market fluctuations or to provide liquidity to the project at particular times of utility.

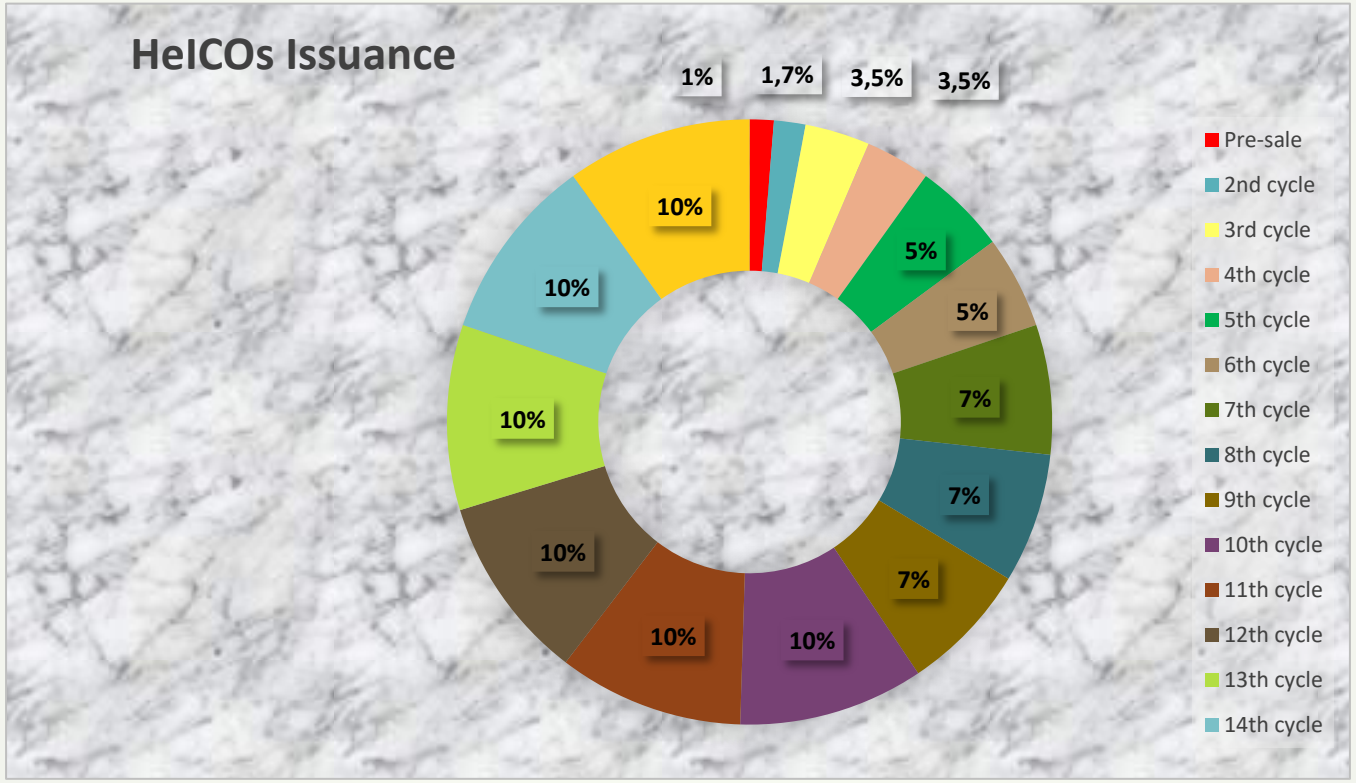
Q5 is divided into three parts with the following percentages between Governance, Management and Operations:
- Governance: 40% of Officers Share;
- Management: 30% of Officers Share;
- Operations: 20% of Officers Share;
-Support Staff: 10% of Quota Officers,

where for Support we mean all the non-managerial staff who performs support, accompaniment and collaboration to the planned and cataloged activities. If this quota is not allocated, it will be divided among the Officers according to the above quota.



HEICO TOKENS DISTRIBUTION RULES AND TRANSPARENCY – 5/5

The total available tokens will be 100.000.000 (100 M) for a value of activities of at least 100 M Eur at date.



A fraction of at least 1% (i.e. 1 M HECs) will be released at the pre-sale phases. The remaining will be stored in the company and released in subsequent periodic issuances. The present plan considers to allocate the remaining 99% in the following 12 years, with a pseudo-linear saturation growth as reported above.

THE TEAM

Position	Name	Institution
General Coordinator		
Scientific Coordinator	Prof. Gerardo Iovane	Dipartimento di Eccellenza di Informatica, Universita' di Salerno, Italy
Managing Director for Health Infrastructure		
Managing Director for Drugs Solutions		

RESEARCH AREA

ROLE	NAME
Research Coordinator Token Valorization and Numerical Analysis Perspective	Prof. Luigia Puccio
Research Coordinator of the solution for health	
Research Coordinator for ICT infrastructure	Prof. Michele Nappi
Research Coordinator Database infrastructure	Prof. Genoveffa Tortora
Research Coordinator of Blockchain Computing Unit	Dr. Antonio Rapuano
Research Coordinator of Decentralised Solutions	Dr. Riccardo Amatore

ICT TECHNOLOGIES AREA

ROLE	NAME
Technological Platforms Manager	Dr. Germano Ingenito
Server Solution Manager	Dr. Riccardo Amatore
Expert for HeICO Technology	Eng. Umberto Mariniello

ECONOMIC, FINANCIAL, LEGAL AND COMMUNICATION AREA

ROLE	NAME
Crowdfunding Manager	Prof. Luca Sensini
Crowdfunding Manager	Dr. Paolo Costantini
Crowdfunding Manager	Dr. Andrea Nicastro
Crowdfunding Manager	
Crowdfunding Manager	
Crowdfunding Manager	
Crowdfunding Manager	
Coordinator of the Taxes and Financial Management Area	Dr. Fabrizio Cerrato
Manager of Compliance and Risk Management Area	Adv. Marco Cocilovo
Strategy Area Manager	Dr. Fabrizio D'Aloia
Legal Area Manager	Adv. Himmanuel Emilio Rinciari

PARTNERS AND STRATEGIC CONSULTANTS

- University of Salerno, Italy
- Digital Atmosphere Srls
- University of Messina, Italy