

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 635
Tallahassee, FL 32311

946000034397
SOLICITATION FOR BIDS
#04/17205--01058--010
****122.50 ****122.50

SUBJECT: Phar-Med Clinical Research Consulting, Inc.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the above corporation and check in the amount of \$ 122.50.

FROM:

Michele P. Kelley

Name

3348 Coquina Key Drive

Address

St. Petersburg, FL 33705

City, State, & Zip

(813) 822-1335

Telephone Number

RECEIVED
65 APR 17 PM 1:41
STATE
TALLAHASSEE, FLORIDA

APR 19 1996

BSB

Note: Additional copy of articles is needed only when certified copy is requested.

ARTICLES OF INCORPORATION

OF

Phar-Med Clinical Research Consulting, Inc.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

FILED
96 APR 17 PM 1:41
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Phar-Med Clinical Research Consulting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3348 Coquina Key Drive
St. Petersburg, FL 33705

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

One Thousand (1,000) Shares

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Michele P. Kelley
3348 Coquina Key Drive
St. Petersburg, FL 33705

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Michele P. Kelley
3348 Coquina Key Drive
St. Petersburg, FL 33705

The undersigned has(have) executed these Article of Incorporation this

Twelfth day of April, 19 96.

Michele P. Kelley, Chief Executive Officer
Signature/Title

Signature/Title

Signature/Title

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: Phar-Med Clinical Research Consulting, Inc.

2. The name and address of the registered agent and office is:

Michele P. Kelley
(NAME)

3348 Coquina Key Drive
(P.O. BOX NOT ACCEPTABLE)

St. Petersburg, FL 33705
(CITY/STATE/ZIP)

FILED
25 APR 17 PM 1:41
TALLAHASSEE, FLORIDA

SIGNATURE

Michele P. Kelley
(corporate officer)

TITLE

Chief Executive Officer

DATE

April 12, 1996

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Michele P. Kelley

DATE

April 12, 1996

REGISTERED AGENT FILING FEE: \$35.00