

## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 Phone : (850) 521-1000 : (850)558-1575 Fax Number

# FOREIGN PROFIT/NONPROFIT CORPORATION

NBTY, INC.

Certificate of Status 0			
Certified Copy	1		
Page Count	05		
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Corporate Filing Menu

NO. 445 RELEP. 2 SECRETARY OF STATE DIVISION OF CORPORATIONS

2009 JUN 12 AM 9: 50

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

REGISTER A FO		RIDA STATUTES, THE FOLLOWING IS SUBMITTED TO NSACT BUSINESS IN THE STATE OF FLORIDA.
(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPO Corp," "Inc," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION,"
(If name unavai	lable in Florida, coter alternate corpor	ate name adopted for the purpose of transacting business in Florida)
2. <u>  }e</u>	aware	3
	ander the law of which it is incorpore	sted) (FEI number, if applicable)
· · · · · · · · · · · · · · · · · · ·	24, 1979 c of incorporation)	5. PER DETUAL
6.	e or meorpotation)	(Duration: Year corp. will cease to exist or "perpetual")
0	(Date first transacted h	usiness in Florida, if prior to registration)
2100	~ · // /	& 607.1502, F.S., to determine penalty liability)
7. <u> </u>	Smithtown Ave	enue, Konkonkoma NY 11779  ffice address)
2100 (	mithtown Avenu	A7
9100 5		iling address)
8. <u>To TA</u> (Purpose)	PRASACT ATL LAUX s) of corporation authorized in home s	THE BUSINEST DEMAKED IN The STATE OF FERENT
	et address of Florida registered age	,
Name:	Corporation Service Com	- · ·
Office Address:	1201 Hays Street	
	Tallahassee	, Florida 32301
	(City)	(Zip code)
Having been nam lesignated in this Turther agree to co	application, I hereby accept the a comply with the provisions of all st	pt service of process for the above stated corporation at the place ppointment as registered agant and agree to act in this capacity. I tutes relative to the proper and complete performance of my duties,
ınd I am familiar	with and accept the obligations of	f my position as registered agent.

Corporation Service Company Matthew Young as its agent (Registered agent's signature)

11. Attached is a certificate of existence duly antheoricated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having furstody of corporate records in the jurisdiction under the law of which it is incorporated.

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SECRETARY OF SIRFL
DIVISION OF CURTORATION

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12. Names and business addresses of officers and/or directors:
A. DIRECTORS
see attachment
Address:
Vice Chairman:
Address:
Director:
Address:
Autos.
Director:
Address:
B. OFFICERS
President Set attachment
Address:
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attachen addendum to the application listing additional officers and/or directors.
de la i
(Signature of Director or Officer listed in number 12 of the application)
14. HARVEY KAMIL, PRESIDENT
(Typed or printed name and capacity of person signing application)

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#### NBTY, INC.

#### **Directors**

Arthur Rudolph Scott Rudolph Michael Ashner Glenn Cohen Aram G. Garabedian Peter White Neil H. Koenig

#### **Officers**

Scott Rudolph - Chief Executive Officer
Harvey Kamil - President and Chief Pinancial Officer
Hans Lindgren- Senior Vice President, Operations and Corporate Secretary
James P. Flaherty - Senior Vice President, Marketing and Advertising
Glenn Schneider- Senior Vice President, Assistant to the CEO

SECRETARY OF STATES

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# Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NBTY, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF JUNE, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NETY, INC."
WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JULY, A.D. 1979.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

SEVICE IAM OF CORPORATION

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for may varify this certificate cells at coxp. delaware, gov/authver. shiml

AUTHENTY CATION: 7359054

DATE: 06-12-09