

F95000001743

CORPORATE COVER SHEET

ACCOUNT NUMBER: FCA 000000007

95 APR 10 PM 2 40

REFERENCE: Cooper
(Sub Account)

DIVISION OF CORPORATIONS

DATE: 4-10-95

800001452538

REQUESTOR NAME: Corporate Research Services
4244 W. Tennessee St.

ADDRESS: Suite 388
Tallahassee, FL. 32304

TELEPHONE: (904) (539-1128) ext ()

CONTACT NAME: Donna C Key

CORPORATION NAME: Versa Pharm Incorporated

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 10 PM 12:15
11/24

DOCUMENT NUMBER: _____
(if applicable)

AUTHORIZATION: [Signature]

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-9)
- PLAIN STAMPED COPY

- Call When Ready
- Walk In
- Mail Out

- Call if Problem
- Will Wait

- After 4:30
- Pick Up

3:30

Foreign Qualification

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Shelley G. Merideth

Address: 200 N. Cobb Pkwy. Suite 210

Marietta, GA 30062

Director: _____

Address: _____

B. OFFICERS

President: R. Joe Ware

Address: 200 N. Cobb Pkwy. Suite 210

Marietta, GA 30062

Vice President: _____

Address: _____

Secretary: Gerald B. Brown

Address: 200 N. Cobb Pkwy. Suite 210

Marietta, GA 30062

Treasurer: Gerald B. Brown

Address: 200 N. Cobb Pkwy. Suite 210

Marietta, GA 30062

NOTE: If necessary, you may attach an addendum to this application listing additional officers and/or directors.

13. Gerald B. Brown
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of this application)

14. Gerald B. Brown, Secretary/Treasurer
(Typed or printed name and capacity of person signing application)

Secretary of State
Corporations Division
Suite 315, West Tower
2 Martin Luther King Jr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 950870619
CONTROL NUMBER : 9431987
DATE INC/AUTH/FILED : 12/29/1994
JURISDICTION : GEORGIA
PRINT DATE : 03/28/1995
FORM NUMBER : 211

GERALD BROWN
PO 7509
MARIETTA GA 30065

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 10 PM 12:46

CERTIFICATE OF EXISTENCE

I, **MAX CLELAND**, Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

VERSAPHARM INCORPORATED
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above and was incorporated, formed, or authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution or certificate of cancellation with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Max Cleland

MAX CLELAND
SECRETARY OF STATE



CORPORATIONS
656-2817

CORPORATIONS HOT LINE
404-656-2222
Outside Metro-Atlanta