

# F96000004170

Amendment  
 Request Name  
 \_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 City/State/Zip Phone #  
 \_\_\_\_\_

RECEIVED  
 96 AUG 15 AM 11:31  
 DIVISION OF CORPORATION

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Eurohealth Limited (EHL)  
 (Corporation Name) (Document #)
2. \_\_\_\_\_  
 (Corporation Name) (Document #)
3. \_\_\_\_\_  
 (Corporation Name) (Document #)
4. \_\_\_\_\_  
 (Corporation Name) (Document #)

400001923654  
 -08/15/96--01091--014  
 \*\*\*\*\*85.00 \*\*\*\*\*85.00

- ☒ Walk in   
 ☒ Pick up time 2:00   
 ☐ Certified Copy  
☐ Mail out   
 ☐ Will wait   
 ☐ Photocopy   
 ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Examiner's Initials	
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## TRANSMITTAL LETTER

TO: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: EUROHEALTH LIMITED (Please see attached resolution adopting  
(Name of corporation - must include suffix) alternate name)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Janice Scinto DiRose  
(Name of Person)

AmeriLawyer, Chartered  
(Firm/Company)

3526 North Federal Highway  
(Address)

Fort Lauderdale, Florida 33308  
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

Janice Scinto DiRose  
(Name of Person)

at ( 954 ) 565-6595  
(Area Code & Daytime Telephone Number)

### COURIER ADDRESS:

Qualification/Tax Lien Sec.  
Division of Corporations  
409 E. Gaines St  
Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 12, 1996

AMERILAWYER  
343 ALMERIA AVE  
CORAL GABLES, FL 33134

The name EHL, INC. has been reserved for 120 days beginning July 10, 1996. The reservation number is R96000003342 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lanham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (904) 488-9000, the Name Availability Section


Judy Eure

Letter number: 896A00038205

Extract from a meeting of the Board of Eurohealth Limited on July 8, 1996

" It was and is hereby resolved that the Company operate in the State of Florida under the name "EHL, Inc". The Secretary was authorised to make appropriate arrangements to give effect to this resolution."

I certify that this is a true copy of a minute of the Directors meeting of July 8, 1996

  
Robert S Child  
Secretary

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION  
TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:

1. EUROHEALTH LIMITED (Please see attached resolution adopting alternate name)  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or  
abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural  
person or partnership if not so contained in the name at present.)

2. Delaware  
(State or country under the law of which it is incorporated)

3. 65-0677138  
(FEI number, if applicable)

4. 6/5/96  
(Date of Incorporation)

5. perpetual  
(Duration: Year corp. will cease to exist or "perpetual")

6. July 16, 1996  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, AND 817.155, F.S.))

7. 1515 North Federal Highway, Suite 300  
Boca Raton, Florida 33432  
(Current mailing address)

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8. distributors of over the counter pharmaceuticals and vitamins  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of  
Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT**  
acceptable)

Name: Robert Child

Office Address: 1515 North Federal Highway, Suite 300

Boca Raton, Florida, 33432  
(Zip Code)

10. Registered agent's acceptance:

*Having been named as registered agent and to accept service of process for the above stated  
corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with  
and accept the obligations of my position as registered agent.*



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, 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 custody of corporate records in the jurisdiction under the law of which it is  
incorporated

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable)

**A. DIRECTORS (Street address only- P. O. Box NOT acceptable)**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Witold S. Suliminski

Address: 1515 North Federal Highway, Suite 300

Boca Raton, Florida 33432

Director: Gerald Houghton

Address: 1515 North Federal Highway, Suite 300

Boca Raton, Florida 33432

**B. OFFICERS (Street address only- P. O. Box NOT acceptable)**

President: Richard Graffena

Address: 1515 North Federal Highway, Suite 300

Boca Raton, Florida 33432

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Robert Child


Address: 1515 North Federal Highway, Suite 300

Boca Raton, Florida 33432

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Robert Child, Secretary  
(Typed or printed name and capacity of person signing application)

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**ADDENDUM**

**Additional Directors:**

**Robert Child  
1515 North Federal Highway  
Suite 300  
Boca Raton, Florida 33432**

**Dale McElwee  
1515 North Federal Highway  
Suite 300  
Boca Raton, Florida 33432**

**Richard Grajirena  
1515 North Federal Highway  
Suite 300  
Boca Raton, Florida 33432**

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*State of Delaware*  
*Office of the Secretary of State*

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EUROHEALTH LIMITED" 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 FIFTEENTH DAY OF JULY, A.D. 1996.

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A handwritten signature in cursive script, reading "Edward J. Freel".

*Edward J. Freel, Secretary of State*

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AUTHENTICATION:

DATE:

8025758

07-15-96