N950000002595

Department of State
Division of Corporations
P. O. Box 6327 Tallahassee, FL 32314 FLORIDA PHYTO-RESEARCH INSTITUTE, INC. (Proposed corporate name - must include suffix) 000004504840 -06702795--01000--022 ****122.50 ****122.50 Enclosed is an original and one (1) copy of the articles for: \$122.50 \$131.25 \$78,75 \$70.00 Filing Fee & Certified Copy Filing Fee, Filing Fee Filing Fee Certified Copy & Certificate & Cordficate Additional Copy Required Robert Kenon FROM: Name (printed or typed) 630 W. Brevard Street Address Tallahassee, Fla 32304 City, State & Zip 904-224-2522 Daytime Telephone number bh 6/2

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned, acting as incorporator(s) of a corporation pursuant to chapter 617, Florida Statutos, adopt(s) the following Articles of Incorporation:

ARTICLE I

The name of the corporation shall be:

Florida Phyto-Research Instituto, Inc.

ARTICLE II

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

231-B West Virginia Street Tallahassee, Fla 32301

ARTICLE III
Purpose(s)

The specific purpose(s) for which the corporation is organized is (are):

To research, study develop and commercialize new natural material and product derived from Florida natural cultivated plant products. Expected outcomes includes developing high value alternative crops for Florida farmers and industry resulting from the commercialization of new products for medicinal and dietary supplement purposes.

ARTICLE IV

Manner of election of directors
The manner in which the directors are elected or appointed is as follows:

The method of election will be stated in the by-laws.

ARTICLE V

Limitation of corporate powers
The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes, unless limited are as follows:

Initial registered agent and street address
The name and the street address of the initial registered agent is:

Robert Kenon 630 W. Brovard Street Tallahassee, Florida 32304

The name(s) and the street address(es) of the incorporator(s) for these articles of incorporation is(are):

- 1) Elsa Pilarinou 5327 Pembridge Place Tallahassee, Fla 32308
- 2) Robert Kenon 630 W. Brevard Street Tallahassee, Fla 32304
- Ray Shackleford 1555 Delaney Drive Tallahassee, Fla 32308

The undersigned incorporator has executed these Articles of Incorporation this <u>Jul</u> day of ______, 1995.

Signature of Incorporator:

Robert Kenon
Typed name of incorporator signing

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CERTIFICATE OF DESIGNATION OF 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: FLORIDA PHYTO-RESEA	RCH INSTITUTE, INC.
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2.	. The name and address of the registered agent and office is:	FILI July -2 EARLASS
	Robert Kenon (Name)	TO STA
	(P.O. Box or Mail Drop Box NOT ACCEPTABLE)	
Tallahassee, Fla 32304 (CITY/STATE/ZIP)		

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 obligations of my position as registered agent.

 $\frac{\text{Colores}}{\text{(Signature)}} \qquad \frac{\text{Colores}}{\text{(Date)}}$