TRANSMITTAL LETTER

P0000003350

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

000003088980--2 -01/05/00--01043--007 *****87.50 *****87.50

SUBJECT:	Drug Tek Pharmacal, Inc.	
	(Proposed corporate name - must include suffix)	

Enclosed is an origina	al and one(1) copy of the articles	s of incorporation and a c	neck for:	7		
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
		ADDITIONAL CO	PY REQUIRED	₽ s	2500	
FROM:	Rumi Hac Name (Pr	Callum inted or typed)		CRETARY LAHASSE	JAN -5	TEM
	3101 Woodsmi	11 DRIVE	- <u></u>	OF STATE	pu 2: 59	D
	<u>Helbourne</u> , F	32934 State & Zip		>		÷
	321- 725- Daytime T	5034 elephone number				

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

2000 JAN -5 PM 2:59

ARTICLES OF INCORPORATION

TALLAHASSEE, FLORINA

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

ARTICLE 1 NAME

The name of the corporation shall be:

DrugTek Pharmacal, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3101 Woodsmill Drive, Melbourne, Florida 32934

ARTICLE HISHARES

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

One Hundred (100)

ARTICLE IVINITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Rumi MacCallum

3101 Woodsmill Drive, Melbourne, Florida 32934

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Rumi MacCallum

3101 Woodsmill Drive, Melbourne, Florida 32934

(An additional article must be added if an effective date is requested.)

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.

Signature/Registered Agent

Date