TRANSMITTAL LETTER 700037465 Group Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314 Regent Pharmaceutical SUBJECT: (PROPOSED CORPORATE NAME - MUST INCLUDE SU Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$78.75 \$87.50 \$78.75 \$70.00 Filing Fee Filing Fee, Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED FROM: Name (Printed or typed)

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

Daytime Telephone number

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be:	
REGENT PHARMACEUTICALS GROUP,	NC.
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  89 (1) REGENTS PARK DR #540  TOMPA PURPOSE  The purpose for which the corporation is organized is:	01APR -9 AH 7 SECRETARY 01 STALLAHASSEE FLC
DISTRIBUTION HEALTH PRODUCTS	7: 50 STATE LORIDA
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):	. 24
CHUNYANG JIANG	
LORGTTA LAU	
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:  CHUNYANG JURN WESLEY COUNTY FL  1237 KEY WEST OT WESLEY COUNTY FL	33543
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
chunyang Trans 1237 KEY WEST CT WESLEY CHAPEL.	FC,33843
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Having been named as registered agent to accept service of process for the above stated corporation at a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap	the place designated in this pacity
Chrisque Giace 41	6101
Signature/Registered Agent Date	

Signature/Incorporator