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Division of Corporations

Page 1 of 2

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Florida Department of State  
Division of Corporations  
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To:

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Fax Number : (850) 205-0381

From:

Account Name : CORPORATE & CRIMINAL RESEARCH SERVICES  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

**FLORIDA PROFIT CORPORATION OR P.A.**

**CONJUNCTIVE MEDICINE CORPORATION**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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FLORIDA DEPARTMENT OF STATE  
Ken Detzner  
Secretary of State

January 9, 2003

CORPORATE & CRIMINAL RESEARCH SER

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SUBJECT: CONJUNCTIVE MEDICINE CORPORATION  
REF: W03000000821

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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H03000012597

## 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:

Conjunctive Medicine Corporation

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17241 NE 13th Avenue, North Miami Beach, FL, 33162

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Research and development of nutritional supplements

### ARTICLE IV SHARES

The number of shares of stock is:

100 shares, \$1.00 par value

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Daniel Goodman, President, 17241 NE 13th Avenue, North Miami Beach, FL, 33162

Daniel Wasserman, Secretary, 1030 NE 170th Terrace, North Miami Beach, FL, 33162

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

CorpDirect Agents, Inc.  
103 N. Meridian Street  
Tallahassee, FL 32301

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Daniel Goodman, 17241 NE 13th Avenue, North Miami Beach, FL, 33162

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent Pam Wolfe, IT'S Agent

1/7/03

Date



Signature Incorporator

Jan. 8, 2003

Date

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