

P03000153937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

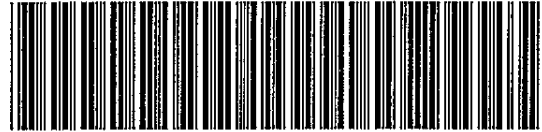
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 11 AM 2:42

12-19-07

TRANSMITTAL LETTER

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

SUBJECT: _____
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM:

MR. DAYO AKINWALE
Name (Printed or typed)

P.O. BOX 2484.
Address

PALM BEACH, FL 33480.
City, State & Zip

(561) 655-4413.
Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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DIVISION OF CORPORATIONS
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ARTICLE I NAME

The name of the corporation shall be:

ONDO PHARMACEUTICAL COMPANY, INCORPORATED.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

270 1/2 B SEMINOLE AVENUE..
PALM BEACH, FL 33480.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WHOLESALE PHARMACEUTICAL PRODUCTS. RE PACKAGING OF PHARMACEUTICAL PRODUCTS, LABELLING OF PHARMACEUTICAL PRODUCTS.

ARTICLE IV SHARES

The number of shares of stock is:

50,000 SHARES.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MR. DAYO AKINWALE., PRESIDENT. P.O. BOX 2484, PALM BEACH, FL 33480.
MR. DAYO AKINWALE., SECRETARY. P.O. BOX 2484, PALM BEACH, FL 33480.
MR. DAYO AKINWALE., TRESURER, P.O. BOX 2484, PALM BEACG, FL 33480.

ARTICLE VI REGISTERED AGENT

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

MR. DAYO AKINWALE.
270 1/2 B SEMINOLE AVENUE,
PALM BEACH, FL 33480.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MR. DAYO AKINWALE.
P.O. BOX 2484,
PALM BEACH, FL 33480.

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

Dayo E
Signature/Registered Agent

12-06-2003
Date

Dayo E
Signature/Incorporator

12-06-2003
Date