

P07000029610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

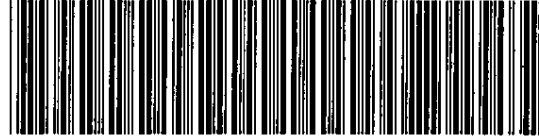
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100090556651

03/06/07--01037--029 **128.75

FILED

2007 MAR -6 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAR -8 2007

TRANSMITTAL LETTER

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

SUBJECT: Certificate of Domestication filing.

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

FEES:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	<u>\$78.75</u>
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
-----------------------	---------

FROM: Burton W. Berger, President
Name (printed or typed)

8891 Majorca Bay Drive
Address

Lake Worth, Florida 33467
City, State & Zip

(561) 434-9774
Daytime Telephone Number

CERTIFICATE OF DOMESTICATION

The undersigned, Burton W. Berger, President
(Name) (Title)
of Doris Pharmaceutical Consulting Corp. a foreign corporation,
(Corporation Name)
in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was June 11, 1996.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was Arizona.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was Doris Pharmaceutical Consulting Corp.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is Doris Pharmaceutical Consulting Corp.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was STATE OF ARIZONA
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am President, of Doris Pharmaceutical Consulting Corp.
and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 5 day of March, 2007.

Burton W. Berger
(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$50.00
Articles of Incorporation and Certified Copy	\$78.75
Total to domesticate and file	\$128.75

2007 MAR -6 PM 2:54
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
of
DORIS PHARMACEUTICAL CONSULTING
CORP.**

FILED
2007 MAR -6 PM 2:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE 1 – NAME

The present name of the corporation is **DORIS PHARMACEUTICAL CONSULTING CORP.**

ARTICLE 2 – PRINCIPAL OFFICE

The Principal place of Business/mailing address of the office shall be –

8891 Majorca Bay Drive, Lake Worth, Florida 33467

ARTICLE 3 – CORPORATE PURPOSE

The purpose for which the corporation is organized, is the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as amended from time to time.

The present purpose is to conduct the business as a Consultant to persons acting as consultant's to various duly incorporated pharmaceutical corporations.

ARTICLE 4 – AUTHORIZED SHARES

The corporation shall have the authority to issue 10,000 shares of class "A" common stock at \$100 par value. The par value of the shares may be changed from time to time at the discretion of the Board of Directors. The Board, may issue additional shares or decrease the number of shares at its discretion. Each of the outstanding shares shall entitle the holder thereof to one (1) vote submitted to a vote of all shareholders.

The present number of shares outstanding at the filing of these Articles is 380, and the number of shares entitled to vote are 380.

There shall be no preemptive rights granted to any shareholder.

ARTICLE 5 – BOARD OF DIRECTORS

The Board of Directors and officers of the Corporation currently consists of 3 directors and officers as follows –

Burton W. Berger, President, 8891 Majorca Bay Drive, Lake Worth Florida 33467
Sandra Berger, Secretary, 8891 Majorca Bay Drive, Lake Worth Florida 33467
Douglas M. Berger, V.P./Treasurer, 8891 Majorca Bay Drive, Lake Worth Florida 33467

The business and affairs of the Corporation shall be generally managed by the Board of Directors. The Board of Directors have granted to the President the authority of authority running the daily operations of the Corporation.

The Board of Directors shall have the authority to fix Director's annual compensation. Any such compensation may be established, changed, and/or terminated without notice to or consent of the shareholders.

ARTICLE 6 – INDEMNIFICATION

The Corporation shall indemnify any person who incurs expense by reason of such person acting as an officer, Director, employee or agent of the Corporation. This indemnification shall be mandatory in all circumstances in which indemnification is permitted by law.

ARTICLE 7 – INCORPORATOR

The incorporator is –

BURTON W. BERGER
8891 Majorca Bay Drive
Lake Worth, Florida 33467
(561) 434-9774

ARTICLE 9 – REGISTERED AGENT

The name and address of the Registered Agent of the Corporation is Burton W. Berger, whose address is 8891 Majorca Bay Drive, Lake Worth, Florida 33467. He has been a bona fide resident of the State of Florida for more then thirteen (13) years.

.....
IN WITNESS HEROF, we the undersigned, have here onto signed our names this date, March 5, 2007.


BURTON W. BERGER
Incorporator & President


SANDRA BERGER
Secretary

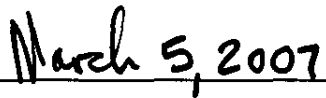
ACCEPTANCE OF REGISTERED AGENT

DORIS PHARMACEUTICAL CONSULTING CORP.

I, BURTON W. BERGER, having been designated by Doris Pharmaceutical Consulting Corp. at the place designated in the Certificate, to act as the Registered Agent. I am familiar with, and hereby consent to act in that capacity until removal or resignation is submitted in accordance with the State of Florida statutory requirements.



Signature- Registered Agent



Date