TION 500000 CCH FROM: E DIVISION CORPORA 1492 W FLAGLER ST DEPARTMENT OF STATE SUITE 200 STATE OF FLORIDA MIAMI FL 33135-409 EAST GAINES STRET CONTAT: RAY STORMONT TALLAHASSEE, FL 32399 PHONE: (305) 841-3694 FAX: (904) 922-400 FAX: (305) 541-3770 FLORIDA PROFIT CORPORATION OR P.A. DOCUMENT TYPE: (((H95000004277))) NAME: CLINICAL PHARMACOILOGY ASSOCIATES, INC. JMBER: H95000004277 CURRENT STATUS: REQUESTED FAX AUDIT NUMBER: H95000004277 DATE REQUESTED: 04/17/1995 TIME REQUESTED: 09:40:12 CERTIFIED COPIES: CERTIFICATE OF STATUS: 0 METHOD OF DELIVERY: FAX NUMBER OF PAGES: 4 **ACCOUNT NUMBER: 072450003255** ESTIMATED CHARGE: \$122.50 Note: Please print this page and use it as a cover sheet when submitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit number on the top and bottom of all pages of the document. (((H95000004277))) ** ENTER 'M' FOR MENU. ** ENTER SELECTION AND (CR): Help F1 Option Menu F2 NUM CAPS Connect: 00:04:

SECRETARNOF STATE
TALLAHASSEEN, FLORIDA

TO SECRETARNOF STATE
TO S

3:40 AM

E TIONS PUBLIC ACCESS SYSTEM

ELECTRONIC FILING COVER SHEET FROM: EMPIRE CORPORATE KIT COMPANY (((H95000004277)))

TO: DIVISION OF CORPORATIONS 1492 W FLAGLER ST

DEPARTMENT OF STATE SUITE 200

STATE OF FLORIDA MIAMI FL 33135-409 EAST GAINES STRET STORMONT CONTAT: RAY

TALLAHASSEE, FL 32399 PHONE: (305) 541-3694 FAX: (904) 922-400 FAX: (306) 641-3770

FLORIDA PROFIT CORPORATION OR P.A. DOCUMENT TYPE:

(((H95000004277))) NAME: CLINICAL PHARMACOILOGY ASSOCIATES, INC.

CURRENT STATUS: REQUESTED FAX AUDIT NUMBER: H95000004277

TIME REQUESTED: 09:40:12 DATE REQUESTED: 04/17/1995

CERTIFICATE OF STATUS: 0 CERTIFIED COPIES: 1

METHOD OF DELIVERY: FAX ACCOUNT NUMBER: 072450003255 NUMBER OF PAGES: 4

ESTIMATED CHARGE: \$122.60

Note: Please print this page and use it as a cover sheet when aubmitting documents to the Division of Corporations. Your document cannot be processed without the information contained on this page. Remember to type the Fax Audit

number on the top and bottom of all pages of the document.

(((H95000004277)))

** ENTER 'M' FOR MENU, **

GNTER SELECTION AND (CR): Help F1 Option Menu F2

NUM CAPS Connect: 00:04:

CORRECTION NEW NAME

Quite supported by the

54 13 KU 123 U 17 J.

أحد و المحالية

።.

(Name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME/ADDRESS

The name of the corporation and address of the corporation is:
(Principal)

(Principal)

(Principal)

(Chiliege Praemacousey of Florida, Miami, Florina 33156

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida Law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida

ARTICLE IV - CAPITAL STOCK.

of Dollar(s) (\$ 10. par value Common Stock, which sall be designated Common Shares

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the Initial Registered Agent of this corporation is

Address: 9506 SOUTH RED ROAD

City: M:AM: State: FLOR: DA Sip 33156

acepaned by:

Douglas desterle 16000 Old Cutter Rd. miami, Fl 33156 305:665-7155

-2-

H9500000 4277

H9500000 4277

(Seal)

٠,

lame!	1506 South	ESTERLO	
Address:	506 SOUTH	KED KOL	<u> </u>
tey. Mitt	Mi . State: Froni	DA_ Zipi_3.	7.56
vame:	19.		
	State:		
		,	
fame i			•
	. , -		
ity:	State:	2ip•	
ARTICLE VII -(1			
the names and a	ddresses of the perso	on(a) si gnin g t	hese Articles
	n are as follows:	•	
iame:	SOG SOUTH K	ESTERLE	
ddress: 29	506 SOUTH K	PED ROAD	
ity: MiAA	Mi State: FLORE	DA 21p: 3	3/56
_			
lamot . /			
Address:	,	· · · · · · · · · · · · · · · · · · ·	

CERTIFICATE TO ACKNOWLEDGE REGISTERED AGENT

Cortificate of Registered Agent

of t

CLINIOAL PHARMACOLOGY OF FLORIDA, INC.

Pursuant to Florida Statutes, Section 48.091 and 607.034, the following is submitted: The above Corporation, desiring to organise under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

MIAMI, FLORIDA 33156

has named: Douglas W. OESTERLE

accept service of process within this state.

ACKNOWLEDGEMENT

Raving been named to accept service of process for the above stated Corporation at this place desinated in this certificate I hereby accept to act in this capacity, and agree to comply with the provisisons of Florida Law in keeping open said office.

Howland. Clastilo
Registered Agent