

P95000069813

WOLFSON & KONTIGSBURG, P.A.

SUITE 300  
4400 SOUTH STATE ROAD 7  
DAVIE, FLORIDA 33314

ANDREA LEE WOLFSON  
ALAN H. KONTIGSBURG  
JOAN F. DYMOND

TELEPHONE  
(904) 583-4570  
FAX (904) 583-4063

August 23, 1995

State of Florida  
Secretary of State  
DIVISION OF CORPORATIONS  
P.O. Box 63251  
Tallahassee, FL 32314

4400000158343004  
-09/14/95--000017--011  
\*\*\*\*131.25 \*\*\*\*131.25

Re: 1. Redox Pharmaceutical, Inc.  
2. The Institute of Free Radical Pathology, Inc.

TO WHOM IT MAY CONCERN:

Enclosed please find the following items regarding each of the above-referenced corporation:

1. the Articles of Incorporation;
2. this firm's checks numbered 6306 and 6707 in the amount of \$131.25 each, representing the filing fee (\$35), the fee for designation of registered agent (\$35), the fee for a certified copy of the Articles of Incorporation (\$52.50) and the fee for a Certificate of Status (\$8.75).

Please process this request for both corporate entities and provide the undersigned with the appropriate documentation. Thank you.

Sincerely,

*Andrea L. Wolfson*  
ANDREA L. WOLFSON

jtp  
Enclosures

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*Dmc 9/11/95*

FILED  
95 SEP 11 PM 2:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LAW OFFICES OF  
**WOLFSON & KONIGSBURG, P.A.**

SUITE 104  
4400 SOUTH STATE ROAD 7  
DAVIE, FLORIDA 33314

ANDREA LEE WOLFSON  
ALAN H. KONIGSBURG  
JOAN F. DYNOND

TELEPHONE  
BROWARD (305) 583-4870  
FAX (305) 583-4063

August 30, 1995

State of Florida  
Secretary of State  
DIVISION OF CORPORATIONS  
P.O. Box 6327  
Tallahassee, FL 32314

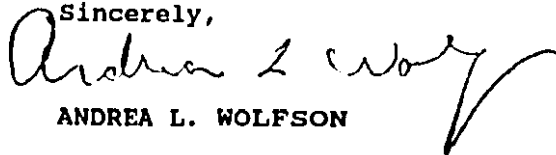
ATTENTION: MS. DORIS MCDUFFY

Re: 1. Redox Pharmaceutical  
2. The Institute of Free Radical Pathology

Dear Doris:

Thank you again for bringing to my attention that the original Articles of Incorporation were omitted from my mailing of August 23, 1995. Same are enclosed herewith. This will further confirm your advice that you have the filing fee checks for each corporation. Thank you.

Sincerely,



ANDREA L. WOLFSON

jtp  
Enclosures

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**ARTICLES OF INCORPORATION**  
**REDOX PHARMACEUTICAL, INC.**

**ARTICLE I-NAME**

The name of this corporation is Redox Inc. (hereinafter referred to as "Redox Pharmaceutical").

**ARTICLE II-DURATION**

This corporation shall have perpetual existence commencing on the date of the filing of these Articles with the Department of State.

**ARTICLE III-PURPOSE**

This corporation is organized to provide boarding home services and for the purpose of transacting any or all lawful business.

**ARTICLE IV-CAPITAL STOCK**

This corporation is authorized to issue one thousand (1000) shares of par value common stock which shall be designated "Common Shares".

**ARTICLE V - PRE-EMPTIVE RIGHTS**

Every shareholder, upon the sale for cash of any new stock of this corporation shall have the right to purchase his prorata share thereof (as nearly as may be done without issuance of fractional shares) at the price at which it is offered to others.

**ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of this corporation is 7200 West Commercial Boulevard, Lauderhill, Broward County, Florida 33351 and the name of the initial registered agent of this corporation is Andrea L. Wolfson, Esquire.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The initial street address of the principal office of this corporation is 4491 South State Road 7, Suite 314, Davie, Broward County, Florida 33314.

**ARTICLE VII - INITIAL BOARD OF DIRECTORS**

This corporation shall have three (3) Directors constituting the initial Board of Directors. The number of Directors may be either increased or decreased from time to time by the By-Laws. The names and addresses of the initial Board of Directors of this corporation are:

<u>NAME</u>	<u>ADDRESSES</u>
DEBBIE SLAVIN	7200 West Commercial Boulevard Lauderhill, Florida 33351
HERBERT R. SLAVIN, M.D.	7200 West Commercial Boulevard Lauderhill, Florida 33351
GEORGE KINDNESS, M.D.	7207 Stonebrook Court Middletown, Ohio 45044

**ARTICLE VIII - INCORPORATORS**

The name and address of each person signing these Articles are:

<u>NAMES</u>	<u>ADDRESSES</u>
DEBBIE SLAVIN	7200 West Commercial Boulevard Lauderhill, Florida 33351
HERBERT R. SLAVIN, M.D.	7200 West Commercial Boulevard Lauderhill, Florida 33351
GEORGE KINDNESS, M.D.	7207 Stonebrook Court Middletown, Ohio 45044

**ARTICLE IX - INDEMNIFICATION**


The corporation shall indemnify any officer or director, or any former officer or director, to the full extent permitted by law.

**ARTICLE X - AMENDMENT**

This corporation reserves the right to amend or repeal any provision contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this \_\_\_\_ day of \_\_\_\_\_, 1995.

  
Subscriber DEBBIE SLAVIN

  
Subscriber HERBERT R. SLAVIN, M.D.

  
Subscriber GEORGE KINDNESS, M.D.

STATE OF FLORIDA     )  
COUNTY OF BROWARD   ) ss.

Before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared, DEBBIE SLAVIN and HERBERT R. SLAVIN, M.D., known to be and known by me to be the persons who executed the foregoing Articles of Incorporation, and they acknowledged before me that they executed those Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and  
affixed my official seal in the State and County aforesaid, this  
31 day of August, 1995.

Andrea L. Wolfson  
Notary Public  
State of Florida at Large

My Commission Expires: 10-13-99

Personally Known ✓ OR Produced Identification

Type of Identification Produced Identification



ANDREA L. WOLFSON  
Notary Public, State of Florida  
My Commission Expires 10-13-1999

STATE OF OHIO )  
COUNTY OF Hamilton ) ss.

Before me, a Notary Public authorized to take  
acknowledgments in the State and County set forth above, personally  
appeared, GEORGE KINDNESS, M.D., known to be and known by me to be  
the person who executed the foregoing Articles of Incorporation,  
and he acknowledged before me that he executed those Articles of  
Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and  
affixed my official seal in the State and County aforesaid, this  
29<sup>th</sup> day of July, 1995.

[Signature]  
Notary Public  
State of Ohio

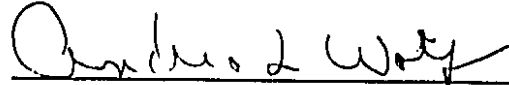
My Commission Expires: 10-13-99

Personally Known ✓ OR Produced Identification Identification

Type of Identification Produced Identification

ACCEPTANCE OF REGISTERED AGENT

I, ANDREA L. WOLFSON, having been named to accept service of process for the above named corporation, as per the foregoing Articles of Incorporation, at the place designated therein, I am familiar with and accept the duties and responsibilities as registered agent for said corporation.

  
ANDREA L. WOLFSON, ESQUIRE

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# P95000069813

OFFICE USE ONLY (Document #)

Andrea L. Wilfong  
(Requestor's Name)  
4991 South St. Rd. 7  
(Address)  
Orville Fl. 33314  
(City, State, Zip) (Phone #)

OFFICE USE ONLY

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95 NOV -7 AM 8:15  
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*Amend*

NOV 9 3 1995

Examiner's Initials



ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

FILED  
95 NOV -7 AM 8:15  
TALLAHASSEE, FLORIDA

\_\_\_\_\_  
REDOX PHARMACEUTICAL, INC.

\_\_\_\_\_  
(present name)

*Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

ARTICLE III - PURPOSE.

This corporation is organized to prepare, manufacture, and do all things necessary to produce nutritional products and for the purpose of transacting any or all lawful business.

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

**THIRD:** The date of each amendment's adoption: OCTOBER 17, 1995

FOURTH: Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.


☐ The amendment(s) was/were approved by the shareholders through voting groups.  
*The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were  
sufficient for approval by \_\_\_\_\_"  
voting group

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this day 17<sup>th</sup> of October, 19<sup>95</sup>.

Signature X   
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

HERBERT R. SLAVIN

\_\_\_\_\_  
Typed or printed name

VICE PRESIDENT AND INCORPORATOR

\_\_\_\_\_  
Title