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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MIAMI SETEMBER 17, 1996

DEPARTMENT OF THE STATE  
DIVISION OF INCORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

900001954159  
-09/24/96--01027--012  
\*\*\*\*122.50 \*\*\*\*122.50

I am sending these ARTICLES OF CORPORATION- BETTER LIFE PHARMACEUTICAL  
LABORATORIES INC. for their registration  
Attached to these, is a check for \$122.50 to pay all fees.

  
GRACIELA E. LEPIANE

POSTAL ADDRESS:  
10975 SW 40 ST #337  
MIAMI FL 33165

(305) 221-3887

*Jose Lepiane*  
CORRECT SPELLING BY PHONE TO  
Pharmaceutical corp name  
*QH*

*7096-20060*  
*9/24/96*  
*10/2/96*



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

September 24, 1996

GRACIELA E. LEPIANE  
10975 SW 40 ST #337  
MIAMI, FL 33165

SUBJECT: BETTER LIFE LABORATORIES INC.  
Ref. Number: W96000.00060

We have received your document for BETTER LIFE LABORATORIES INC. and check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6915.

Pamela Hall  
Document Specialist

Letter Number: 396A00043879

FILED

ARTICLES OF INCORPORATION  
OF

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

BETTER LIFE PHARMACEUTICAL LABORATORIES INC.

ARTICLE I - NAME

The name of this Corporation is: BETTER LIFE PHARMACEUTICAL LABORATORIES INC.

ARTICLE II - DURATION

This Corporation shall have perpetual existence commencing at the time of filing of the articles of incorporation with the Department of State.

ARTICLE III - PURPOSE

This Corporation is organized for the purpose of transacting any and all lawful business, to include the following: to perform all and any lawful business both within and without the United States.

ARTICLE IV - CAPITAL STOCK

This Corporation is authorized to issue 100 shares of common stock at \$ 50.00 (fifty dollars) par value. The authorized capital shall be no less than \$ 5,000.00 (FIVE THOUSAND DOLLARS).

ARTICLE V - RIGHTS UPON LIQUIDATION AND DISSOLUTION

In the event of any voluntary or involuntary liquidation, dissolution, or winding up of this corporation, the holders of record of the common shares shall receive a rateable distribution of the assets of this corporation.

ARTICLE VI - PREVENTIVE RIGHTS

Each share holder, upon the sale for cash of any stock of this Corporation shall have the right to purchase his prorated share thereof at the price at which it is offered to others.

ARTICLE VII - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this corporation shall be: 10975 SW 40 ST. # 337 Miami Florida 33165. The name of the initial registered agent of this corporation at that address is: GRACIELA ESTER LEPIANE

The principal address is the same as the registered office.

#### ARTICLE VIII-INITIAL BOARD OF DIRECTORS

This Corporation shall have three directors initially. The number of directors may be increased or diminished from time to time as provided by the BY LAWS, but shall never be less than one (1). The name and address of the initial Directors of this Corporation are as follows:

NAME	ADDRESS
GRACIELA E. LEPIANE	9670 SW 17 ST MIAMI - FLORIDA 33165

#### ARTICLE IX-INCORPORATORS

The name and addresses of the persons signing these Articles of incorporation and the number of shares each are at this time subscribing to are:

NAME	ADDRESS	SHARES
GRACIELA E. LEPIANE	9670 SW 17 ST MIAMI - FLORIDA 33165	100

#### ARTICLE X-OFFICERS

The initial officers of this corporation and their addresses are as follows:

NAME	ADDRESS	TITLE
GRACIELA E. LEPIANE	9670 SW 17 ST MIAMI - FLORIDA	PRESIDENT
GRACIELA E. LEPIANE	9670 SW 17 ST MIAMI - FLORIDA	VICE-PRESIDENT
GRACIELA E. LEPIANE	9670 SW 17 ST MIAMI - FLORIDA	TREASURER
GRACIELA E. LEPIANE	9670 SW 17 ST MIAMI - FLORIDA	SECRETARY

#### ARTICLE XI-AMENDMENT

The Corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation or any amendment thereof, reservation.

We, the undersigned, being each and all original subscribers to the capital stock here in above named for the purpose of forming a Corporation for profit to do business both within and without the state of Florida and out of the United States

of America, do hereby make, subscribe, acknowledge, and file, this certificate, hereby declaring and certifying that the facts here in stated are true and the respectively agree to take the number of shares of stock here in above set forth and accordingly have here unto set out hands and seal this 17 day of Setember 1996.

  
GRACIELA E. LEPIANE  
INCORPORATOR

STATE OF FLORIDA

COUNTY OF DADE

I, HEREBY CERTIFY, that on this day, before me, a Notary Public for the State of Florida, an Officer duly authorized to administer oaths and take acknowledgments, personally appeared, GRACIELA E. LEPIANE, to me well known to be the persons described as subscribers in, and who executed the foregoing Articles of Incorporation of BETTER LIFE PHARMACEUTICAL LABORATORIES INC. and acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS, my hand and seal in the county and State named above, on this 17 Setember 1996.





CARMEN COMESANAS  
MY COMMISSION # CC480944 EXPIRES  
July 16, 1999  
BONDED THRU TROY FAIR INSURANCE, INC.

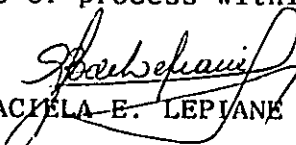
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TALLAHASSEE, FLORIDA

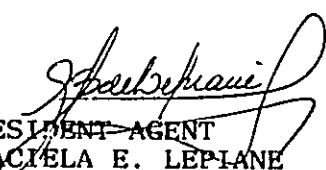
RESIDENT AGENT CERTIFICATE

BETTER LIFE PHARMACEUTICAL LABORATORIES INC. desiring to organize under the laws of the State of Florida, with its principal offices as indicated in the Articles of Incorporation, has named, GRACIELA E. LEPIANE as its agent to accept service of process within this State.

  
GRACIELA E. LEPIANE

ACKNOWLEDGMENT

Having been named to accept service of process for the above Stated Corporation at the place designated in this certificate, I Hereby accept to act in this capacity and agree to comply with the provision of said act relative to keep open said office.

  
RESIDENT AGENT  
GRACIELA E. LEPIANE

STATE OF FLORIDA

COUNTY DADE

BEFORE ME, THE UNDERSIGNED AUTHORITY, a Notary Public of the State of Florida, personally appeared, GRACIELA E. LEPIANE, the first party executing the Resident Agent Certificated and the latter party executing the Acknowledgment, both foregoing to which I attest.

WITNESS, my hand and seal in the county and state above named on this 17 day of Sete'mber 1996.





CARMEN COMESANAS  
MY COMMISSION # CC480944 EXPIRES  
July 16, 1999  
BONDED THRU TROY FAIR INSURANCE, INC.