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

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PROFESSIONAL PHARMACEUTICAL PRODUCTS, INC.

(Proposed corporate name - must include suffix)

ADDITIONAL COPY REQUIRED

FROM: RICHARD JAMES BERGERON
Name (Printed or typed)

S35 POINT SEASIDE DRIVE
Address

CRYSTAL BEACH, FLORIDA, 34681.

City, State & Zip

B13-781-0676

Daytime Telephone number

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

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ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PROFESSIONAL PHARMACEUTICAL PRODUCTS, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

PRINCIPAL PLACE OF BUSINESS: 835 POINT SEASIDE DRIVE

CRYSTAL BEACH, FLORIDA 34681

MAILING ADDRESS:

SAME AS ABOVE.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

(100) ONE HUNDRED

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:RICHARD JAMES BERGERON

835 POINT SEASIDE DRIVE

CRYSTAL BEACH, FLORIDA 34681.

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

The unde	rsigned i	ncorporator(s) l	nas(have) executed these Articles of Incorporation this
7th	day of	FEBRUARY	, 19 97
			· · · · · · · · · · · · · · · · · · ·

(An additional article must be added if an effective date is requested.)

Signature

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is PROFESSIONAL PHARMACEUTICAL PRODUCTS. IN	<u>C.</u>
2.	The name and address of the registered agent and office is:	.6 A10
	RICHARD JAMES BERGERON (NAME)	FIL VISION TAP 37 MAR -6
	R35 POINT SEASIDE DRIVE (P. O. Box or Mail Drop Box NOT ACCEPTABLE)	GOF STAT
	CRYSTAL BEACH, FLORTDA 34681.	10HS

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

FEBRUARY 17,1997
(DATE)

(SIGNATURE)