

TRANSMITTAL LETTER

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

SUBJECT: Pharmaceutical Research Associates, Inc.
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check
for \$ 70.00

300002545523--6
-06/03/98-01022-004
*****70.00 *****70.00

FROM: Marjorie Robinson
Name (printed or typed)
1504 NE 14 Street
Address
Ft. Lauderdale, FL 33304
City, State, & Zip
(954) 523-6153
Telephone Number

FILED
98 JUN -3 PM 2:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Note: Please provide the original and one copy of the Articles.

ARTICLES OF INCORPORATION

OF

Pharmaceutical Research Associates, Inc.

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:

Pharmaceutical Research Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

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

1504 NE 14 Street
Ft. Lauderdale, FL 33304

ARTICLE III CAPITAL STOCK

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

Six (600) hundred

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Marjorie Robinson
1504 NE 14 Street
Ft. Lauderdale, FL 33304

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ARTICLE V INCORPORATOR(S)

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

Marjorie Robinson
1504 NE 14 Street
Ft. Lauderdale, FL 33304

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

24th day of April, 19 98.

X Marjorie Robinson
Signature

Signature

Signature

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: Pharmaceutical Research Associates, Inc.

2. The name and address of the registered agent and office is:

Marjorie Robinson

(NAME)

1504 NE 14 Street

(P.O. BOX NOT ACCEPTABLE)

Ft. Lauderdale, FL 33304

(CITY/STATE/ZIP)

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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.

SIGNATURE

X Marjorie Robinson

DATE

April 24, 1998