P98000103205

December 8, 1998

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Sirs:

Please record the Articles of LXS THERAPIES, INC. as attached and return the verification of the recorded articles to:

000002708600--8 -12/10/98--01037--007 *****70.00 ******70.00

Glenn R. Luisi Accountant, P.A. 104 Prestwood Lane Mooresville, NC 28117

Attached is my check # 2862 for \$70.00 for the recording fee.

Very Truly Yours,

Glenn R. Luisi

FILED

B DEC TO PH 1:27

ECKETARY OF STATE
LLAHASSEE, FLORID,

Dine /10/98

ARTICLES OF INCORPORATION OF LXS THERAPIES, INC.

The undersigned; for the purpose of forming a corporation under the FLORIDA GENERAL CORPORATION ACT hereby adopts the following Articles of Incorporation:

ARTICLE ONE NAME & PRINCIPAL ADDRESS

The name of the corporation is

LXS THERAPIES, INC.
The initial address is 4091 NW 5th STREET
COCONUT CREEK, FL 33066

ARTICLE TWO DURATION

The term of existence of the corporation is perpetual.

ARTICLE THREE PURPOSE

The corporation may transact any and all lawful business for which corporations may be incorporated under the Laws of the STATE OF FLORIDA.

ARTICLE FOUR CAPITAL STOCK

The maximum number of shares which the corporation has authority to issue is 1000, all which shall be common shares with a \$1.00 par value.

ARTICLE FIVE REGISTERED OFFICE

The street address of the initial registered office of the corporation shall be 4091 NW 5th STREET COCONUT CREEK FL 33066 and the name of the initial registered agent at such address is ALEXIS C. MITCHELL I do hereby accept the position of REGISTERED AGENT.

ALEXIS C. MITCHELL Registered Agent

ARTICLE SIX
PRE-EMPTIVE RIGHTS

The shareholders shall have Pre-emptive Rights.

ARTICLE SEVEN DIRECTORS

- 7.01 The Board of Directors of the corporation shall consist of at least one member.
- 7.02 The name and address of the initial Director of the Board:

NAME

ADDRESS

TITLE

ALEXIS C. MITCHELL

4091 NW 5th STREET COCONUT CREEK, FL 33066

PRESIDENT

ARTICLE EIGHT INCORPORATOR

The name and address of the incorporator is:

NAME

ADDRESS

ALEXIS C. MITCHELL

4091 NW 5th STREET COCONUT CREEK, FL 33066

IN WITNESS WHEREOF, I have subscribed my name this 3 of December, 1998

ALEXIS C. MITCHELL

Incorporator

STATE OF FLORIDA

: SS

COUNTY OF BROWARD

On this day of lecember 1998, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared ALEXIS C. MITCHELL known to me to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same for purposes therein contained.

IN WITNESS WHEREOF, I hereunto set my hand official seal.

NOTARY PUBLIC

STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES:

