

P990000/6924

TRANSMITTAL LETTER

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

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-02/22/99--01054--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: MAELINA FEMININE CARE INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee  
☐ \$78.75 Filing Fee & Certificate of Status

☐ \$78.75 Filing Fee & Certified Copy  
☒ \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

FROM: Dr Paul Higgs  
Name (Printed or typed)

9894 N Kendall Dr C212  
Address

MIAMI FL 33176  
City, State & Zip

(305) 284-2686  
Daytime Telephone number

The same people have  
T98000001122

FILED  
99 FEB 22 PM 1:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

W99-4026  
REGISTER FEB 22 1999



# MEAD-HIGGS RESEARCH INC.

P.O. Box 566063  
Miami, FL 33256  
(305) 275-6656



**Dana G. Mead** Ph.D.(Microbiology)  
President and CEO

**Paul I. Higgs** Ph.D.(Chemistry)  
Sr. Vice President

**David J. Wylie** Ph.D.(Chemistry)  
Vice President R&D

15 February 1999

Beth Register  
Department of State  
Division of Corporations  
409 E Gaines St  
Tallahassee, FL 32399

Dear Beth,

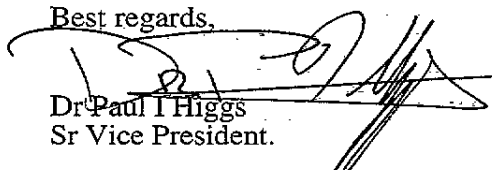
I am hoping you remember our conversations from last September when we had difficulties with tracking documents and payments while incorporating our company last year. With this in mind I hoped you might allow me the luxury of sending our latest incorporation request to you directly.

Regarding the incorporation of Mead-Higgs Research Inc. I have as of this date sent a trace to the post office to see if we can track down the missing money order from last year. As soon as I have a result from this I will let you know.

More poignantly, as a result of our current business it is now advantageous for us to form our Maelina Feminine Care division into a corporation in it's own right. You will find the appropriate articles of incorporation and the transmittal letter enclosed along with the processing fee (this time I've just sent a cashiers cheque rather than a money order, once bitten twice shy as the saying goes!). Upon searching names I found only our own Maelina Feminine Care trademark and logo so I assume Maelina Feminine Care Inc. will be fine as the company name. If there are any problems please call me on my direct line (305) 284-2686.

Thanks for all your help last year and in this current endeavor.

Best regards,

  
Dr Paul I Higgs  
Sr Vice President.

# ARTICLES OF INCORPORATION

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

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## ARTICLE I NAME

The name of the corporation shall be:

MAELINA FEMININE CARE INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

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

9894 N KENDALL DRIVE C212  
MIAMI, FL 33176

MAIL: P.O. Box 566063  
MIAMI, FL 33256

## ARTICLE III SHARES

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

100 (Common Stock)

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Dr Paul Higgs  
9894 N KENDALL DR C212  
MIAMI, FL 33176

## ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Dr Paul Higgs  
9894 N KENDALL DR C212  
MIAMI, FL 33176

Signature/Incorporator

2/11/99

Date

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

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/Registered Agent

2/11/99

Date