# P99000109618

### TRANSMITTAL LETTER

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



SUBJECT:	MMOOR			UTicALS	inc.
{P1	oposed corporate na	ame - musţ include s	9000	0307223: 12/16/9901021 *****70.00 ****	92 005 **70.00
Enclosed is an original for: \$70.00 Filing Fee	and one (1) cop  \$78.75  Filing Fee & Certificate	s 122.50 Filing Fee & Certified Copy  Additional Cop	\$131.2 Filing Fee, Certified Co & Certificat	5 py	
FROM:	22 SE BOCA	Address	eet FL 32	- - - - -	
		Telephone number	ь		

F. CHECKER DEC 2 1 1999

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

#### ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

VAMMOOR PHARMACEUTICALS inc

ARTICLE II PRINCIPAL OFFICE

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

BOCA RATON FL 33432

ARTICLE III SHARES

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

ONE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

ARTHUR VANMOOR
NO. 219
22 SE 4 STREET
BOCA RATON FL 33432

#### 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):

ARTHUR VANMOOR
NO. 219
22 SE 4 STREET
BOCA RATON FL 33432

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:	VANMOOR	PHARMACE	UTical	<u>s</u> inc
2. The name and address of the r	egistered agent and office is:			
AR	THUR VAN MOOR		SECHETA	91 230 66 14
	SE 4 ST Red- D. Box or Mail Drop Box NOT ACCEPT.	MO, 210		<b>골</b> 🖫
<u> </u>	CA RATON F	L 33432		<u> </u>

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) DECEMBER 13 1995
(DATE)