

# F03000004302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

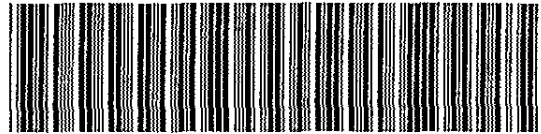
Name  
Availability

Document  
Examiner DCC

Updater DCC  
Office Use Only

Expenditure DCC

Power DCC



500022311455

08/25/03--01104--003 \*\*70.00

FILED

03 AUG 25 AM 8:00

CLERK OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Pharmacy (13) Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kevin P. Hagan  
(Name of Person)  
Pharmacy (13) Inc.  
(Firm/Company)  
731 C - Commerce Dr.  
(Address)  
Venice, Fl. 34292  
(City/State and Zip code)

FILED  
03 AUG 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kevin P. Hagan at ( 239 ) 936-1800  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Pharmacy(13), Inc.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware

(State or country under the law of which it is incorporated)

3. 61-1384781

(FEI number, if applicable)

4. 2/20/2001

(Date of incorporation)

5. "perpetual"

(Duration: Year corp. will cease to exist or "perpetual")

6. "upon qualification" / 4-2003

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 82 Spruce Street Business Center, Suite 113, Murray, Ky 42071

(Principal office address)

731-C Commerce Dr. Venice, FL. 34292

(Current mailing address)

8. Respiratory medication provider (mail order)

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Kevin P. Hagan

Office Address: 731-C Commerce Dr.

Venice, FL

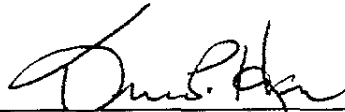
(City)

, Florida 34292

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED  
03 AUG 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Kevin P. Hagan  
Address: 731 C - Commerce ~~Cent~~ Dr.  
Venice, Fl. 34292  
Vice Chairman: Charles D. Hines  
Address: 731 C - Commerce ~~Cent~~ Dr.  
Venice, Fl. 34292  
Director: Larry C. Vetter  
Address: 19481 Devonwood Cir  
Ft. Myers, Fl. 33912  
Director: \_\_\_\_\_  
Address: \_\_\_\_\_

B. OFFICERS

President: Kevin P. Hagan  
Address: 731 C - Commerce ~~Cent~~ Dr.  
Venice, Fl. 34292  
Vice President: Charles D. Hines  
Address: 731 C - Commerce ~~Cent~~ Dr.  
Venice, Fl. 34292  
Secretary: Charles D. Hines  
Address: 731 C - Commerce ~~Cent~~ Dr., Venice 34292  
Treasurer: Larry C. Vetter  
Address: 19481 Devonwood Cir, Ft. Myers, Fl. 33912

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Charles D. Hines V.C.  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  
14. Charles D. Hines V.C. / V.P. / Sec.  
(Typed or printed name and capacity of person signing application)

FILED  
03 AUG 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHARMACY (13) INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF FEBRUARY, A.D. 2003.

FILED  
03 AUG 25 AM 8:00  
SECRETARY OF STATE  
HALLMARK CENTER  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

3358288 8300

AUTHENTICATION: 2475467

030396092

DATE: 06-16-03