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Florida Department of State  
Division of Corporations  
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Fax Number : (850) 205-0383

From:

Account Name : CORPORATE CREATIONS CHICAGO, L.L.C

Account Number : 110450001334

Phone : (773) 935-3920

Fax Number : (773) 935-4020

## FOREIGN PROFIT QUALIFICATION

Adult Care Plans/Rx America Agency, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

TALLAHASSEE, FLORIDA

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**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. Adult Care Plans/Rx America Agency, 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. 02-0690854

(FEL number, if applicable)

4. May 16, 2003

(Date of Incorporation)

5. perpetual

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

6. upon filing this application

(Date first transacted business in Florida. (See Section 607.1501, 607.1502, and 817.133, F.S.))

7. 777 Main Street

Fort Worth, TX 76102

(Current mailing address)

8. Purpose of corporation to be carried out in Florida: all activities permitted under applicable law

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

Corporate Creations Network Inc.  
11380 Prosperity Farms Road #221E  
Palm Beach Gardens, FL 33410

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.

By: 

Corporate Creations Network Inc.

Brian R Fons, VP.

Corporate Creations Chicago L.L.C.  
3023 North Clark Street #318  
Chicago IL 60657  
(773) 935-3920

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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.
12. Names and business addresses of officers and/or directors: (Street address ONLY)

**A. DIRECTORS**

Peter W. Nauert  
777 Main Street  
Fort Worth TX 76102

**B. OFFICERS**

**PRESIDENT** Michael Owens  
777 Main Street  
Fort Worth TX 76102

**SECRETARY** Michael Owens  
777 Main Street  
Fort Worth TX 76102

**TREASURER**

13. Signature of an officer listed in item 12:

By: MICHAEL OWENS

Name: Michael Owens

Title: President

Date: 11/8/04

Corporate Creations Chicago L.L.C.  
3023 North Clark Street #318  
Chicago IL 60657  
(773) 935-3920

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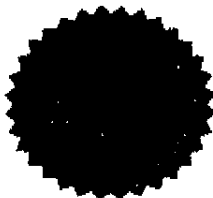
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# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ADULT CARE PLANS/RX AMERICA AGENCY, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2004.



*Harriet Smith Windsor*

Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 3480967

DATE: 11-16-04