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FOREIGN PROFIT/NONPROFIT CORPORATION

Apothecary Shop of Deer Valley, Inc.

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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.

•		P OF DEER VALLEY, INC.	
(Enter name of cor "Inc.," "Co.," "Cor	poration; must include "INCORPORAT p," "Inc," "Co," or "Corp.")	red," "Company," "Corporation,"	-
(If name unaveilab	le in Florida, enter alternate corporate n	ame adopted for the purpose of transacting business in Florida)	₹.
	Arizona	3 13-4318552	
	der the law of which it is incorporated)	(FEI number, if applicable)	-
Janu	ary 26, 2006	5. Perpenial	
(Date of	incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	•
	_		
	(Date first transacted busine (SEE SECTIONS 607.1501 & 60	oss in Plorida, if prior to registration) 07.1502, F.S., to determine possity liability)	•
	23620 North 20th Drive, Suite 1	12, Phoenix, AZ 85085	
	(Principal office	address)	•
	23620 North 20th Drive, Suits 1	2. Phoenix, AZ, 85085	
			-
To sell mer	(Current mailing		•
(Purpose(s) o	(Current mailing fical devices and ship prescription medifical devices and ship prescription medifical devices authorized in home state of	cines and any other related activities therem. or country to be carried out in state of Florida)	•
(Purpose(s) o	(Current mailing	cines and any other related activities therem. or country to be carried out in state of Florida)	•
(Purpose(s) o	(Current mailing fical devices and ship prescription medifical devices and ship prescription medifical devices authorized in home state of	cines and any other related activities therein. or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	•
(Purpose(s) o Name and street a Name:	(Current mailing lical devices and ship prescription medifical devices and ship prescription medifical devices and ship prescription media.	cines and any other related activities therein. or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	
(Purpose(s) o Name and street a Name:	(Current mailing lical devices and ship prescription medifical devices and ship prescription medification authorized in home state of different of Florida registered agent: (CT Corporation System	cines and any other related activities therem. Or country to be carried out in state of Florida) (P.O. Box NOT acceptable)	
(Purpose(s) o Name and street a Name:	(Current mailing fical devices and ship prescription medifical devices and ship prescription medification authorized in home state of diress of Florida registered agent: (CT Corporation System 1200 South Pine Island Road	cines and any other related activities therem. or country to be carried out in state of Florida) (P.O. Box NOT acceptable) Provide 33324 (Zip code)	5 3
(Purpose(s) o Name and street a Name: filce Address: Registered agen aving been named signated in this ap	(Current mailing fical devices and ship prescription medifical devices and ship prescription medificorporation authorized in home state of ddress of Florida registered agent: (CT Corporation System 1200 South Pine Island Road Plantation (City) t's acceptance: as registered agent and to accept septication, I hereby accept the appointments of the septication, I hereby accept the appointments.	cines and any other related activities therem. or country to be carried out in state of Florida) (P.O. Box NOT acceptable) , Florida 33324 (Zip code) service of process for the above stated corporation at the interest as registered agent and agree to act in this capales relative to the proper and complete performance of my position as registered agent. Maria Ozaeta	S S S S S S S S S S S S S S S S S S S
(Purpose(s) o Name and street a Name: filce Address: Registered agen aving been named signated in this ap	(Current mailing fical devices and ship prescription medifical devices and ship prescription medification authorized in home state of ddress of Florida registered agent: (CT Corporation System 1200 South Pine Island Road Plantation (City) t's acceptance: as registered agent and to accept seplication, I hereby accept the appoint with the provisions of all statute the and accept the obligations of my	cines and any other related activities therein. or country to be carried out in state of Florida) (P.O. Box NOT acceptable) , Florida 33324 (Zip code) ervice of process for the above stated corporation at the interest as registered agent and agree to act in this capa is relative to the proper and complete performance of my position as registered agent.	S S S S S S S S S S S S S S S S S S S

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:



A. DIRECTORS	6
Chairman:	
Address:	
	·
Vice Chairman:	
Address:	
Director: JOHN D. MUSIL	
Address: 23620 North 20th Drive, Suite 12	
Phoenix, AZ 85085	
Director:	
Address:	,
B. OFFICERS	•
President: JOHN D. MUSIL	
23620 North 20th Drive, Suite 12	
Phoenix, AZ 85085	
Vice President:	M
Address:	
	······
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may after an addendura to the application listing additional officers and/or direct	ciors.
13	
(Signature of Director or Officer listed in number 12 of the application)	·····
JOHN D. MUSIL, DIRECTOR and FRESIDENT (Puted or uringed name and caregity of person signing application)	1

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greating:

I, Brian C. McNell, Executive Director of the Arizona Corporation Commission, do hereby certify that

APOTHECARY SHOP OF DEER VALLEY, INC.

a domestic corporation organized under the laws of the State of Arizona, tild incorporate on January 26, 2008.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said corporation is not administratively dissolved for fallure to comply with the provisions of the Arizona Business Corporation Act; and that its most recent Annual Report, subject to the provisions of A.R.S. sections 10-122, 10-123, 10-125 & 10-1622, has been delivered to the Arizona Corporation Commission for filing; and that the said corporation has not filed Articles of Dissolution as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 15th Day of July, 2008, A. D.

Executive Director

Order Number: ___