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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
MEDICAP PHARMACIES INCORPORATED**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED
10 APR - 1 PM 4:43
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

10 APR - 1 PM 12:38

APPROVED
AND
FILED

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. Medicap Pharmacies Incorporated

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Iowa

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

3. 42-0981231

(FEI number, if applicable)

4. February 16, 1971

(Date of incorporation)

5. perpetual

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

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1 Rider Trail Plaza Drive, Suite 300, Earth City, MO 63045

(Principal office address)

7000 Cardinal Place, Dublin, Ohio 43017

(Current mailing address)

8. Franchisor of pharmacies

(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 NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee

(City)

, Florida 32301

(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.

Corporation Service Company

By: _____

(Registered agent's signature)

Kimberly B. Moret

Assistant Vice President

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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORSSECRETARY OF STATE
TALLAHASSEE, FLORIDAChairman: Jorge M. Gomez, Sole DirectorAddress: 7000 Cardinal PlaceDublin, Ohio 43017

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERSPresident: Michael C. Kaufmann, CEO - PharmaceuticalAddress: 7000 Cardinal PlaceDublin, Ohio 43017Vice President: Stephen T. Falk, EVP, General Counsel & SecretaryAddress: 7000 Cardinal Place, Dublin, Ohio 43017Secretary: Rylan O. Rawlins, Assistant SecretaryAddress: 7000 Cardinal Place, Dublin, Ohio 43017Treasurer: Jorge M. Gomez, SVP & TreasurerAddress: 7000 Cardinal Place, Dublin, Ohio 43017**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. 

(Signature of Director or Officer listed in number 12 of the application)

14. Rylan O. Rawlins, Assistant Secretary

(Typed or printed name and capacity of person signing application)

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**ADDENDUM
To
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION
TO TRANSACT BUSINESS IN FLORIDA**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Item 12 B Continued

Jeffrey W. Henderson, Chief Financial Officer
7000 Cardinal Place, Dublin, Oh 43017

Mark R. Blake, EVP -- Corporate Development and Strategy
7000 Cardinal Place, Dublin, Oh 43017

Terry Burnside, SVP and General Manager -- Medicine Shoppe
1 Rider Trail Plaza Drive, Earth City, Mo 63045

Warren B. Hastings, VP -- Global Trade
7000 Cardinal Place, Dublin, Oh 43017

Stephen J. Reardon, VP -- Quality and Regulatory Affairs
7000 Cardinal Place, Dublin, Oh 43017

John Byrnes, VP -- Taxes
7000 Cardinal Place, Dublin, Oh 43017

Kimberly S. Myers, VP, General Counsel and Assistant Secretary
1 Rider Trail Plaza Drive, Earth City, Mo 63045

John M. Adams, Jr., Assistant Secretary
7000 Cardinal Place, Dublin, Oh 43017

APPROVED
AND
FILEDIOWA SECRETARY OF STATE
MICHAEL A. MAURO

10 APR -1 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date: 4/1/2010

CERTIFICATE OF EXISTENCE

Name: MEDICAP PHARMACIES INCORPORATED (490 DP - 14259)

Date of Incorporation: 2/16/1971

Duration: PERPETUAL

I, MICHAEL A. MAURO, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify that the corporation named on this certificate is in existence and was duly incorporated under the laws of Iowa, that all fees required by the Iowa Business Corporation Act have been paid by the corporation, that the most recent biennial corporate report required has been filed by the Secretary of State, and that articles of dissolution have not been filed.

Certificate ID: CS38686
To validate this certificate please visit the following web site and enter the certificate ID
www.bos.state.ia.us/ ValidateCertificate

Michael A. Mauro
MICHAEL A. MAURO SECRETARY OF STATE