

F17000002767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

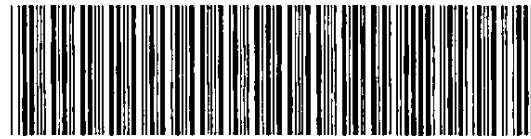
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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05/27/17--01043--025 \*\*67.50

FILED  
2017 JUN 16 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 19 2017  
J. HARRIS

Original - C/M

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Prescriber's Choice, 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," or "Certificate of Good Standing" 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:

Jennifer Molina

Name of Person

Prescriber's Choice, Inc.

Firm/Company

3265 W McNab Road

Address

Pompano Beach, FL 330369

City/State and Zip code

license@vividus.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Molina

Name of Person

at ( 561 ) 404-8885

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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



June 15<sup>th</sup> 2017

RE: Service Request 20173385045  
Document #: W17000026960

Dear Ms. Harris,

As per our conversation on June 15<sup>th</sup>, I am including the original rejection letter as well as the "Certificate of Good Standing". It was brought to my attention that I had selected two boxes regarding the same request. I apologize about that confusion. Please see below for documents included in the rectified package for filing Prescriber's Choice Inc. in Florida:

1. Original filing rejection letter
2. Rejected certification credit memo sheet
3. Official document of "Certificate of Good Standing"
4. Copy of original application of filing Prescriber's Choice Inc. as a foreign entity

If you require any further documentation, please do not hesitate to contact me.

Kind regards,

Jennifer Molina  
*Office Administrator*  
Phone: 561-404-8893 x 130

RECEIVED  
JUN 16 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 29, 2017

JENNIFER MOLINA  
3265 W MCNAB ROAD  
POMPANO BEACH, FL 33069

SUBJECT: PRESCRIBER'S CHOICE, INC.  
Ref. Number: W17000026960

FILED  
2017 JUN 16 PM 2:02  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for PRESCRIBER'S CHOICE, INC. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 717A00006039

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

*IN COMPLIANCE WITH SECTION 607.1563, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Prescriber's Choice, Inc.

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

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

2. Delaware

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

3. \_\_\_\_\_

(FEI number, if applicable)

4. May 10th 2016

(Date of incorporation)

5. Perpetual

(Date of duration, if other than perpetual)

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1562, F.S., to determine penalty liability)

7. 3265 W McNab Road Pompano Beach FL 33069

(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

8. 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)

9. 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.*

**Holly Jones**  
**Assistant Vice President**



(Registered agent's signature)

10. 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**  
2017 JUN 16 PM 2:02  
TALLAHASSEE, FLORIDA  
STATE DEPT OF STATE

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

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. \_\_\_\_\_

Jonathan G. Fenster - COO  
(Typed or printed name and capacity of person signing application)

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2017 JUN 16 PM 2:02  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

Addendum to item number 11

11. Names and business addresses of officers and/or directors

A. DIRECTORS

1. Director: Barret Malkin  
Address: 3265 W McNab Road  
Pompano Beach, FL 33069
2. Director(Chairman): Spencer Malkin (Chairman)  
Address: 3265 W McNab Road  
Pompano Beach, FL 33069
3. Director: L. Jack Staley  
Address: 3265 W McNab Road  
Pompano Beach, FL 33069

B. OFFICERS

1. Officer: Spencer Malkin, CEO  
Address: 3265 W McNab Road  
Pompano Beach, FL 33069
2. Officer: Jonathan Fenster, COO  
Address: 3265 W McNab Road  
Pompano Beach, FL 33069
3. Officer: Barret Malkin, National Director  
Address: 3265 W McNab Road  
Pompano Beach, FL 33069

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2017 JUN 16 PM 2:02  
CLERK OF DISTRICT COURT  
PALM BEACH, FL 33401

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PRESCRIBER'S CHOICE, 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 THIRTEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



6038579 8300

SR# 20174704414

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202696369

Date: 06-13-17