

L03000043788

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

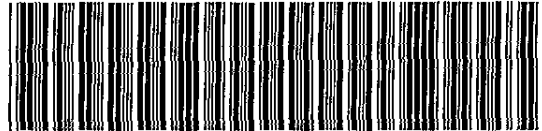
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
DEPT. OF REVENUE
DIVISION OF CORPORATIONS



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 316233 7229242

AUTHORIZATION :

COST LIMIT : \$ 125.00

03 NOV 12 AM 10:46
FILED
TALLAHASSEE, FLORIDA

ORDER DATE : November 11, 2003

ORDER TIME : 9:38 AM

ORDER NO. : 316233-005

CUSTOMER NO: 7229242

CUSTOMER: Saralyn Nemser, Esq
Saralyn Nemser, P.a.

19032 N.e. 29th Avenue

Miami, FL 33180

DOMESTIC FILING

NAME: YOURDISCOUNTDRUGSTORE.COM,
LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 1140

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION OF yourdiscountdrugstore.com, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the Limited Liability Company is yourdiscountdrugstore.com, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

3049 N.E. 183rd Lane
Aventura, Florida 33180

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE
AND REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Blanca Cooper
3049 N.E. 183rd Lane
Aventura, Florida 33180

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

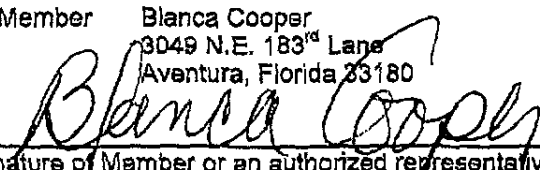
BY:


Blanca Cooper, Registered Agent

ARTICLE IV - Manager(s) or Managing Member(s)

The name and address of each Manager or Managing Member is as follows:

Manager/Managing Member Blanca Cooper
3049 N.E. 183rd Lane
Aventura, Florida 33180



Signature of Member or an authorized representative of member

Manager/Managing Member Antonio Quinones
2731 S.W. 140th Avenue
Miami, Florida 33175



Signature of Member or an authorized representative of member

In accordance with section 608.408(3), Florida Statutes the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Blanca Cooper

Typed or printed name of signee

Antonio Quinones

Typed or printed name of signee