

L08000 116294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

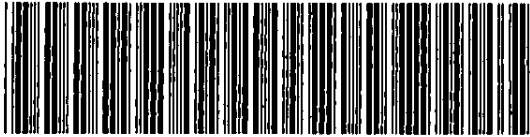
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FLORIDA

**TOWNSEND & BRANNON**  
*ATTORNEYS AND COUNSELORS AT LAW*  
608 W. HORATIO STREET  
TAMPA, FLORIDA 33606-4104

ANITA C. BRANNON  
DAVID A. TOWNSEND

TELEPHONE (813) 254-0088  
FACSIMILE (813) 254-0093

Writer's E MAIL address:  
Davidtownsend@tampabay.rr.com

December 16, 2008

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

RE: Articles of Organization for Florida LLC  
**RX ENHANCEMENT, LLC**

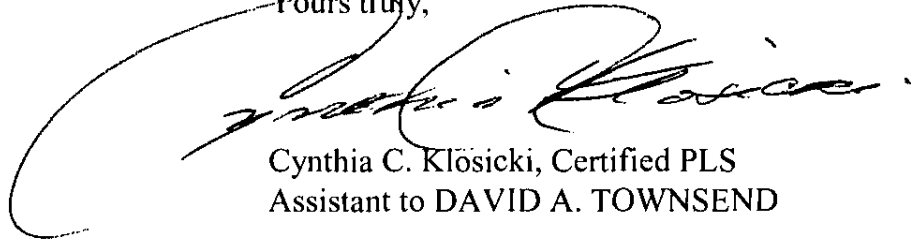
Dear Sir/Madam:

Attached please find for filing with the Division of Corporations an original and one copy of the Articles of Organization for a new Florida limited liability company to be known as **RX ENHANCEMENT, LLC**.

Enclosed is the filing fee in the amount of \$125.00. Please return confirmation of filing to our office.

Thank you.

Yours truly,



Cynthia C. Klosicki, Certified PLS  
Assistant to DAVID A. TOWNSEND

Enclosures

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY  
  
RX ENHANCEMENT, LLC**

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**ARTICLE I - NAME**

The name of the Limited Liability Company is: **RX ENHANCEMENT, LLC.**

**ARTICLE II - ADDRESS**

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

Principal Office Address:

3807 Cliffdale Drive  
Valrico, Florida 33594

Mailing Address:

Same

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

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

DAVID A. TOWNSEND, ESQUIRE  
Townsend & Brannon  
608 West Horatio Street  
Tampa, Florida 33606-4104

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, *Florida Statutes*.



DAVID A. TOWNSEND, ESQUIRE  
Registered Agent

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE IV - MANAGERS OR MANAGING MEMBERS**

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

"MGR: = Manager  
"MGRM" = Managing Member

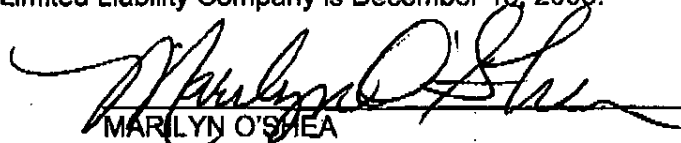
<u>TITLE:</u>	<u>NAME AND ADDRESS:</u>
MGRM	MARILYN O'SHEA 3807 Cliffdale Drive Valrico, Florida 33594
MGRM	JAMAL RAZA 1791 Bobtail Drive Maitland, Florida 32751

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**ARTICLE V - EFFECTIVE DATE**

The effective date of this Limited Liability Company is December 15, 2008.

  
MARILYN O'SHEA  
Signature of Authorized Member