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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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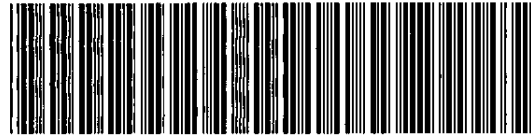
(Business Entity Name)

(Document Number)

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

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DIVISION OF CORPORATIONS  
10 JUL 19 AM 11:42

T. HAMPTON

JUL 20 2010

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: RX Global USA, LLC**

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Timothy A. Boyko

Name of Person

Boyko, Dobeck & Weaver

Firm/Company

6741 Ridge Road, Suite 102

Address

Parma, Ohio 44129

City/State and Zip Code

tboyko@boyko-dobeck.com

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

For further information concerning this matter, please call:

Timothy A. Boyko, Esq.

Name of Person

at ( 440 )

886-3800

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**

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

# BOYKO, DOBECK & WEAVER

ATTORNEYS AT LAW  
6741 RIDGE ROAD  
PARMA, OHIO 44129

\* TIMOTHY A. BOYKO  
TIMOTHY G. DOBECK  
JEANNETTE M. WEAVER

(440) 886-3800  
Fax (440) 843-8878  
www.boyko-doback.com

FLORIDA OFFICE  
1430 ROYAL PALM SQUARE BLVD., #105  
FORT MYERS, FL 33919  
BY APPOINTMENT ONLY

\* ALSO ADMITTED TO PRACTICE IN FLORIDA

July 16, 2010

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

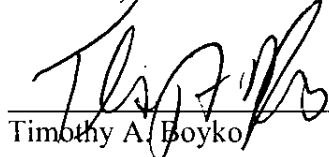
Re: Articles of Organization  
RX Global USA, LLC

Dear Sir or Madam:

Enclosed herein please find the Articles of Organization for RX Global USA, LLC. I have also enclosed a check payable to the Florida Department of State in the amount of One Hundred Thirty Dollars (\$130.00), representing the filing fee and a Certificate of Status. Please proceed in filing the Articles of Organization at your earliest convenience and forward the Certificate of Status to me upon completion.

Thank you for your cooperation in this matter. In the meantime, should you have any questions, please do not hesitate to contact me.

Very truly yours,  
BOYKO, DOBECK & WEAVER

  
\_\_\_\_\_  
Timothy A. Boyko

TAB:cp  
Enclosures

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

RX Global USA, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

### ARTICLE II - Address:

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

#### Principal Office Address:

735 North Highway A1A, Unit 506

Indialantic, Florida 32903

#### Mailing Address:

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Clifford Moritz

Name

735 North Highway, A1A, Unit 506

Florida street address (P.O. Box **NOT** acceptable)

Indialantic

FL 32903

City, State, and Zip

*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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Clifford Moritz

735 North Highway A1A, Unit 506

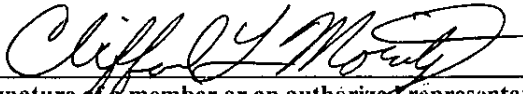
Indianapolis, Florida 32903

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a 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.)

Clifford Moritz

Typed or printed name of signer

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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