

**CORPORATE  
ACCESS,  
INC.**

**P00000037589**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

**WALK IN**

PICK UP 4/14/00 11:00

☒ **CERTIFIED COPY** \_\_\_\_\_

\_\_\_\_\_**CUS**\_\_\_\_\_

\_\_\_\_\_**PHOTO COPY**\_\_\_\_\_

☒ **FILING** Articles

1.) Better Care Drug Store, Inc.  
(CORPORATE NAME & DOCUMENT #)

300003208753--5  
-04/14/00-01009-013  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

2.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

3.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

4.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

5.) \_\_\_\_\_  
(CORPORATE NAME & DOCUMENT #)

**RECEIVED**  
00 APR 14 AM 9:39  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**SPECIAL INSTRUCTIONS** \_\_\_\_\_

**FILED**  
00 APR 14 AM 10:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. SMITH APR 14 2000

## ARTICLES OF INCORPORATION

*The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.*

### **ARTICLE I NAME**

The name of the corporation shall be:

BETTER CARE DRUG STORE, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

17041 SW 109 Place  
Miami, Florida 33157

### **ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Richard Nzeribe  
755 NW 128 Street  
Miami, Florida 33168

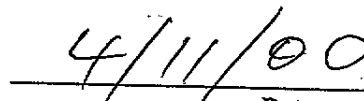
### **ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

Ofoleta Achunike  
17041 SW 109 Place  
Miami, Florida 33157

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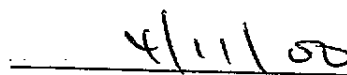
  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

(An additional article must be added if an effective date is requested.)

*Having been named as registered agent and to accept service of process for the above stated corporation 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*

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date