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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 922-4001

From:

Account Name : PARCORP SERVICES, LTD.  
Account Number : I19990000011  
Phone : (877) 603-2533  
Fax Number : (707) 276-4538

**FLORIDA PROFIT CORPORATION OR P.A.**  
**JACKSONVILLE COUNTY PHARMACY SERVICES INC.**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

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B. McKnight DEC 21 2000

FAX AUDIT NO. (((H000000 66537 2 )))

**STATE OF FLORIDA  
ARTICLES OF INCORPORATION OF  
JACKSONVILLE COUNTY PHARMACY SERVICES INC.**

**FIRST:** The corporate name that satisfies the requirements of Section 607.0401 is:  
**JACKSONVILLE COUNTY PHARMACY SERVICES INC.**

**SECOND:** The street address of the initial principal office of the corporation shall be  
**6950 PHILLIPS HIGHWAY, SUITE 17, JACKSONVILLE, FL 32216**  
and the mailing address of the corporation shall be the same.

**THIRD:** The corporation may engage or transact in any or all lawful activities or  
business permitted under the laws of the United States, the State of Florida or any other state,  
country, territory or nation.

**FOURTH:** The number of shares the corporation is authorized to issue is **1000**  
shares of common stock having **NO PAR VALUE**

**FIFTH:** The street address of the initial registered office of the corporation is  
**526 E. PARK AVENUE, TALLAHASSEE, FL 32301**  
the name of its initial registered agent at such address is **NRAI SERVICES, INC.**


**SIXTH:** This corporation is to exist **PERPETUALLY**

**SEVENTH:** The number of Directors constituting the initial Board of Directors of the  
Corporation is **ONE (1)** and the name(s) and address(es) of the person(s) who is/are to  
serve as Director(s) until the first annual meeting of the Shareholders or until their successors are  
elected and qualify are:

**JENNIFER A. DANA**  
**5172 E. CALLE DEL NORTE, SCOTTSDALE, AZ 85018**

**EIGHTH:** The name and street address of the incorporator to these Articles of  
Incorporation: **Michael J. Jagoda, 3108 S. Route 59, Ste. 124-363, Naperville, IL 60564**

**IN WITNESS WHEREOF,** the undersigned has executed these Articles of Incorporation  
on **DECEMBER 21, 2000**

  
\_\_\_\_\_  
Michael J. Jagoda, Incorporator

**Preparer Info:**

**Michael J. Jagoda, 3108 S. Route 59, Ste. 124-363, Naperville, IL 60564**  
**Parcorp Services, Ltd. - Phone: 877-603-2533**  
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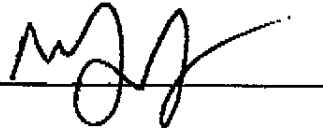
**ACCEPTANCE OF REGISTERED AGENT DESIGNATED  
IN ARTICLES OF INCORPORATION**

**JACKSONVILLE COUNTY PHARMACY SERVICES INC.**

Acceptance by the Registered Agent as required in section 607.0501 (3) F.S.  
**NRAI SERVICES, INC.** is familiar with and accepts the obligations  
provided for in Section 607.0505.

Dated: **DECEMBER 21, 2000**

SIGNED BY: \_\_\_\_\_



**NRAI SERVICES, INC.  
REGISTERED AGENT  
BY: MICHAEL J. JAGODA  
SPECIAL ASSISTANT SECRETARY**

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