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## TRANSMITTAL LETTER

Department of State Division of Corpora P. O. Box 6327 Tallahassee, FL 323	ations	 - -	
SUBJECT: NA	N J. EDWARDS, INC. (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	tinal and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM:	RAYMOND J. HETTERIC	· · · · · · · · · · · · · · · · · · ·	1.65 (12)
	5505 38TH AVE. N.	(Printed or typed)	
	ST. PETERSBURG, FL 33	3710 State & Zip	<u> </u>
	727-384-4888	elenhone number	ar.

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

ARTICLE I NAME

The name of the corporation shall be:

NAN J. EDWARDS, INC.

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SECRETALIANTASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 6000 62ND AVE. N. PINELLAS PARK, FL 33781

ARTICLE III **PURPOSE** 

The purpose for which the corporation is organized is: PHARMACY DESIGN

ARTICLE IV SHARES

The number of shares of stock is: **AUTHORIZED 1,000 SHARES** 

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s): NANCY J. EDWARDS DIRECTOR & PRESIDENT

REGISTERED AGENT ARTICLE VI

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

NANCY J. EDWARDS 6000 62ND AVE. N. PINELLAS PARK, FL 33781

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NANCY J. EDWARDS 6000 62ND AVE. N. PINELLAS PARK, FL 33781

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this ccrtificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

12-16-02 Date

Signature/Incorporator