

PD3000037161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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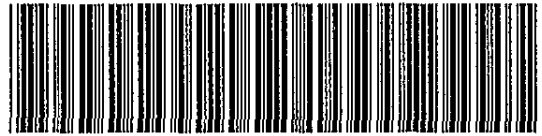
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 MAR 27 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: DISCOUNT DRUGS, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: FRANK P. SUESS
Name (Printed or typed)

3381 FAIRLANE FARMS ROAD
Address

WELLINGTON, FL. 33414
City, State & Zip

(561)-795-1636
Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

DISCOUNT DRUGS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3381 FAIRLANE FARMS ROAD, WELLINGTON, FL. 33414

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RETAIL SALES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

FRANK P. SUESS, PRESIDENT

ARTICLE VI REGISTERED AGENT

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

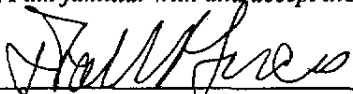
FRANK P. SUESS, 3381 FAIRLANE FARMS ROAD, WELLINGTON, FL. 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

FRANK P. SUESS, 3381 FAIRLANE FARMS ROAD, WELLINGTON, FL. 33414

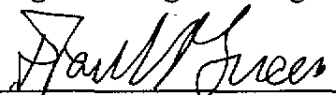
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

03/24/03

Date



Signature/Incorporator

03/24/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA