# P03000104845

(Requestor's Name)	
(Address)	<u>,</u>
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#### TRANSMITTAL LETTER

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

Subject:

K.M.E. RX, INC.

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

[]\$70.00 Filing Fee [X] \$78.75 Filing Fee \*[]\$122.50 Filing Fee \*[]\$131.25 Filing Fe

& Certificate

& Certified Copy

Filing Fee, Certified Copy & Certificate

\*Additional Copy Required

MAILING ADDRESS:

FROM:

Jeetendra Etwaru

11165 Stone Creek Street Wellington, FL 33467

Enclosures: Various

#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

K.M.E. RX, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

11165 Stone Creek Street Wellington, FL 33467

#### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jeetendra Etwaru 11165 Stone Creek Street Wellington, FL 33467 (561)719-2570

#### ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is (are):

Jeetendra Etwaru 11165 Stone Creek Street Wellington, FL 33467

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 17th day of September, 2003

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE CO PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

K.M.E. RX, INC.

2. The name and address of the registered agent and office is:

Jeetendra Etwaru 11165 Stone Creek Street Wellington, FL 33467

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.

