Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000295496 3)))

Note: DO NOT hit the REFRESH/RFLOAD button on your browser from this: page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name : NATIONS BUSINESS CENTER, INC.

Account Number : 120000000238 Phone : (305)591-9448

Fax Number : (954)753-3447

FLORIDA PROFIT CORPORATION OR P.A.

SYNERGY PHARMACY AND MEDICAL SUPPLIES INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing

Public Access Help

FAX AUDIT#(((H03000 295 496 3

}}

)

ARTICLES OF INCORPORATION

TO: SECRETARY OF STATE, STATE OF FLORIDA, TALLAHASSEE, FLORIDA

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

ARTICLE I NAME

The name of the Corporation shall be:

SYNERGY PHARMACY AND MEDICAL SUPPLIES, INC.

The principal place of business of this corporation shall be:

3831 SW 168 TERRACE

MIRAMAR, FL 33027

ARTICLE II NATURE OF BUSINESS

This corporation may engage in any business permitted under the laws of the United State, the State of Florida, or any other State, Country, Territory, or Nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: 1000.

FAX AUDIT# (

3 OCT 13 AM 8:

(H030002954943)

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address (es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) William Forde & Andrea Forde whom resides at 3831 SW 168 Terrace Miramar, Fl. 33027.

ARTICLE VI INCORPORATOR(S)

The names(s) and street address (es) of the incorporator(s) to these articles of incorporation is (are): William Forde whom resides at 3831 SW 168 Terrace Miramar, Fl. 33027.

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this _/O_ day of ______, 2003.

Signature(s) of Incorporator(s)

William Forde President/ Incorporator

Andfeå Forde Vice President

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325, 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.

- The name of the corporation: Synergy Pharmacy and Medical Supplies, Inc.
- 2. The name and address of the registered agent and office is:

William Forde 3831 SW 168 Terrace Miramar FL 33027

SIGNATURE:

TITLE: /Registered Agent

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:	A transmission
	10/je/je/je