

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000034713

**Entity Name:** ONE STOP PHARMACY, INC.

**FILED**  
**Oct 03, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

3193 TECH DR, SUITE B  
ST PETERSBURG, FL 33716

**New Principal Place of Business:**

**Current Mailing Address:**

3193 TECH DR, SUITE B  
ST PETERSBURG, FL 33716

**New Mailing Address:**

**FEI Number:** 20-0785141

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BERSIN, JOHN B  
3193 TECH DR.  
ST. PETERSBURG, FL 33716 US

**Name and Address of New Registered Agent:**

ONE STOP RX LLC  
3193 TECH DR.  
ST. PETERSBURG, FL 33716 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ELIZABETH LEE

10/03/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: OWN  
Name: ONE STOP RX LLC  
Address: 3193 TECH DRIVE, SUITE B  
City-St-Zip: ST. PETERSBURG, FL 33716

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ELIZABETH LEE

SEC

10/03/2013

Electronic Signature of Signing Officer or Director

Date