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# **LAZARUS** 3320 SW 87TH AVENUE MIAMI, FL 33165 (305) 552-5973

CORPORATE FILING SERVICE Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Mail out Certificate of Status Will wait Photocopy **NEW FILINGS AMENDMENTS Profit** Amendment Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

#### 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:

Isabella PHARMacy and dISCOUNT CORP.

#### ARTICLE II - PRINCIPAL OFFICE

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

3180 NW 75T Miam; Fla. 33125

#### ARTICLE III -SHARES

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

100 -

## ARTICLES IV -INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Juan NODESTO HENDEZ

1017 NW 132 are WEST

Miani Ftg. 33182

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#### ARTICLE V - INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

Juan Novesto Mendez 1017 NW 132 are WEST, Hiami Fla 33182

The undersigned incorporator has executed these Articles of Incorporation this 10day of NOVIEW be 2005

ARTICLE VI DIRECTOR(S)

The name(s) and street address (es) of the director(s) to these

Articles of Incorporation is (are): Juan Honesto Hewnez - President

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /REGISTERED OFFICE Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agen

Registered Agent Signature

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