

POS000158108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

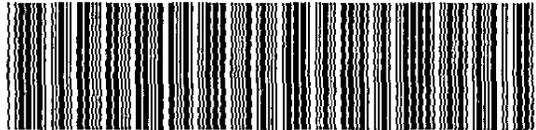
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/23/05--01007--004 **315.00

05 DEC -1 PM 12:05
STATE OF FLORIDA
DEPARTMENT OF REVENUE

RECEIVED
05 NOV 23 AM 9:39
STATE OF FLORIDA
DEPARTMENT OF REVENUE
OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

W05-525218



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 28, 2005

EXPRESS CORPORATE FILING SERVICES INC.

SUBJECT: ANDY'S PHARMACY, INC.
Ref. Number: W05000052521

We have received your document for ANDY'S PHARMACY, INC. and your check(s) totaling \$315.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The docuemnt has been rejected for corrections.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight
Document Specialist
NEW FILINGS

Letter Number: 905A00069200

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:

ANDY'S PHARMACY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

7701 WEST 26 AVE BAY #5 - HIALEAH FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

SHARES: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ANDRES OJEDA - PRESIDENT
7701 WEST 26 AVE BAY #5 - HIALEAH FL 33016

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

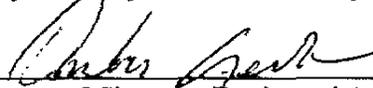
ANDRES OJEDA
7701 WEST 26 AVE BAY #5 - HIALEAH FL 33016

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANDRES OJEDA
7701 WEST 26 AVE BAY #5 - HIALEAH FL 33016

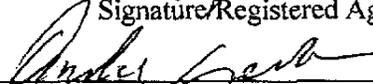
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

NOVEMBER 22, 2005

Date



Signature/Incorporator

NOVEMBER 22, 2005

Date

05 DEC -1 PM 12:05
DIVISION OF CORPORATE REGISTRATION
STATE OF FLORIDA