

**P060000 36890**

Florida Department of State  
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TALLAHASSEE, FLORIDA

**FLORIDA PROFIT/NON PROFIT CORPORATION**  
**CONSULTANT PHARMACIST SERVICES, INC.**

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**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

CONSULTANT PHARMACIST SERVICES, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

1267 SE KIRK STREET  
STUART, FL 34997

**ARTICLE III SHARES**

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

ONE THOUSAND (1,000) SHARES

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

JOSEPH CICCONE  
1267 SE KIRK STREET  
STUART, FL 34997

**ARTICLE V INCORPORATOR**

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

JOSEPH CICCONE  
1267 SE KIRK STREET  
STUART, FL 34997

**ARTICLE VI DIRECTORS/OFFICERS**

The names of the initial directors/officers of this corporation are:

President, Secretary, Director: JOSEPH CICCONE  
1267 SE KIRK STREET  
STUART, FL 34997

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The undersigned incorporator has executed these Articles of Incorporation this 13 day of March, 2006.

  
Signature

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**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE 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:

CONSULTANT PHARMACIST SERVICES, INC.

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

JOSEPH CICCONE  
1267 SE KIRK STREET  
STUART, FL 34997

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.

Joseph Ciccone 3/13/06  
(Signature) (Date)

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