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SECRETARY OF STATE
SECRETARY SEE, FLORDI

D. WHITE DEC -7 2006

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for: □ \$70.00 ▼ \$78.75 □ \$78.75 □ \$87.50	
☐ \$70.00 ☑ \$78.75 ☐ \$78.75 ☐ \$87.50	
Filing Fee Filing Fee & Certificate of Status Example 1	Copy cate of
FROM: DEAN PEDALINO	
Name (Printed or typed)	
9858 INDIAN KEY TRAIL	
SEMINOLE FL 33776 City, State & Zip	
727-507-9255	

NOTE: Please provide the original and one copy of the articles.

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:

PHARMACY MATCHMAKERS INC.

FILED

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SLUNETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9858 INDIAN KEY TRAIL SEMINOLE FL 33776

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MARKETING AND CONSULTING

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DEAN PEDALINO 9858 INDIAN KEY TRAIL SEMINOLE FL 33776 PRESIDENT

ARTICLE VI REGISTERED AGENT

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

GARY J HOLCK 1961 ARVIS CIRCLE E CLEARWATER FL 33764

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DEAN PEDALINO 9858 INDIAN KEY TRAIL SEMINOLE FL 33776

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

X

Signature/Incorporator

12/03/06

Date

12/06/06

Date