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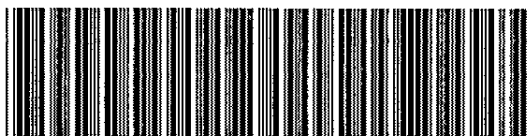
(Business Entity Name)

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. CENTRUM PHARMACY DISCOUNT INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
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NEW FILINGS

☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

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ARTICLES OF INCORPORATION
OF

Centrum Pharmacy Discount Inc

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) Competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I
CORPORATION NAME

The corporation's name shall be: Centrum Pharmacy Discount Inc

ARTICLE II
DURATION

The corporation shall exist perpetually unless dissolved according to Florida Laws.

ARTICLE III
PURPOSE

The corporation is organized for the purpose of engaging in any activity of business Permitted under the laws of the United States and the State of Florida.

ARTICLE IV
CAPITAL STOCK

The corporation is authorized to issue one hundred (100) shares of five dollars (\$ 5.00) par value Common Stock, which shall be designated as "Common Shares".

ARTICLE V
PLACE OF BUSINESS

The principal place of business of said corporation shall be:

48 East 5 Street
Hialeah FL 33010

ARTICLE VI
NUMBER OF DIRECTORS

The number of Directors of this corporation, shall be no less than one (1) nor more than fifteen (15).

ARTICLE VII
BOARD OF DIRECTORS

The name and addresses of the first Board of Directors of this Corporation who shall hold office initially, are as follows:

NAME Mabel Rumayor
ADDRESS 7955 NW 8 St, #8
CITY Miami STATE FL ZC 33126

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZC _____

ARTICLE VIII
INCORPORATORS

The name and addresses of the incorporators signing these Articles of Incorporation, are as follows:

NAME Mabel Rumayor TITLE President
ADDRESS 7955 NW 8 Street, #8
CITY Miami STATE FL ZC 33126

NAME _____ TITLE _____
ADDRESS _____
CITY _____ STATE _____ ZC _____

IN WITNESS WHEREOF, the undersigned subscriber (s) have executed these Articles of Incorporation, this 18 day of December of 2006

Mabel Rumayor (Seal)

_____ (Seal)

STATE OF FLORIDA)
) SS
COUNTY OF DADE)

Before me, a Notary Public authorized to take acknowledgement in the State and County set for above, personally appeared:

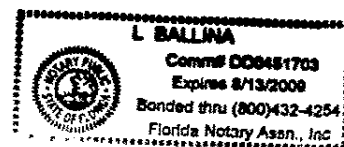
Mabel Rumayor

Known to me and known to be the person (s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that she executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and county aforesaid, this 18 day of December of 2006.

L Ballina

Notary Public
State of Florida at Large



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CERTIFICATE OF REGISTERED AGENT

OF

Centrum Pharmacy Discount Inc

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

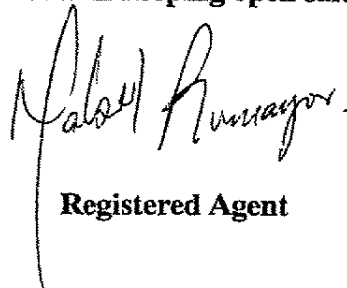
FIRST: That Centrum Pharmacy Discount Inc desiring to organize under the laws of the State of Florida with its principal office as indicated in the articles of incorporation at the City of Miami, County of Dade State of Florida, has named:

Mr/Ms Nabele Rumbayor
Located at 7955 NW 8 Street, #8
City of Miami County of Dade
State of FL

At its Agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position. I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.


Registered Agent