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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : XIOMARA LEE, P.A.

Account Number : I20040000008

Phone : (305) 262-2323

Fax Number : (305) 262-2324

FLORIDA PROFIT/NON PROFIT CORPORATION

ALAIN A. TOLEDO P.A.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$78.75

DIVISION OF CORPORATION

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T. Burch Ark 11 2008

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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:

ALAIN A. TOLEDO P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4135 POINCIANA AVE
MIAMI, FL 33133

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PHARMACEUTICAL MANAGER SERVICES

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):

ALAIN A. TOLEDO (PRESIDENT/DIRECTOR)
4135 POINCIANA AVE
MIAMI, FL 33133

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

ALAIN A. TOLEDO
4135 POINCIANA AVE
MIAMI, FL 33133

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALAIN A. TOLEDO
4135 POINCIANA AVE
MIAMI, FL 33133

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

04/08/2008

Date



Signature/Incorporator

04/08/2008

Date

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