

PO9000050352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000156773210

06/04/09--01023--003 **70.00

FILED

09 JUN -4 /M 8:05

NOTARY PUBLIC
JUL 1 2009

[Handwritten signature]

COVER LETTER

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

SUBJECT: RXELIEF SERVICE P.A.
(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
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Julie Miller
Name (Printed or typed)

8241 Valiant Dr
Address

Naples, FL 34104
City, State & Zip

239-348-5153
Daytime Telephone number

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:

RXELIEF SERVICE P.A.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

8241 Valiant Dr
Naples, FL 34104

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide relief service to pharmacies as needed
Professional service = pharmacist and related duties

ARTICLE IV SHARES

The number of shares of stock is:

100 ⁰⁰

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Julie Miller (President/Owner)
8241 Valiant Dr
Naples, FL 34104

ARTICLE VI REGISTERED AGENT

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

Julie Miller
8241 Valiant Dr
Naples, FL 34104

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julie Miller
8241 Valiant Dr
Naples, FL 34104

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

Julie Miller
Signature/Registered Agent

Julie Miller
Signature/Incorporator

5/30/09
Date

5/30/09
Date

FILED
09 JUN -4 AM 8:06
JULIE MILLER
8241 VALIANT DR
NAPLES, FL 34104