Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6381

rom:

Account Name : LAZARUS CORPORATE FILING SERVI

Account Number: 120000000019
Phone: (305)552-5973
Fax Number: (305)220-1440

**Enter the email address for this business entity to be used for Example annual report mailings. Enter only one email address please.

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION

GALVEZ PHARMACY CORP.

Certificate of Status 0
Certified Copy 1
Page Count 03

Estimated Charge

\$78.75

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Corporate Filing Menu

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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:

GALVEZ PHARMACY CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 137 SW 57TH AVE MIAMI, FLORIDA 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO DO ANY LEGAL BUSINESS RELATED WITH THE HOME HEALTH INDUSTRIES

ARTICLE IV SHARES

The number of shares of stock is:
100 SHARES OF \$5.00 VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ENRIQUE GALVEZ 50% SHARES 137 SW 57 AVE

PRESIDENT

137 SW 57 AVE MIAMI, FLORIDA 33144

VICE PRESIDENT

ISABEL GALVEZ 50% SHARES 137 SW 57 AVE MIAMI, FLORIDA 33144 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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ARTICLE VI REGISTERED AGENT

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

137 SW 57 AVE

MIAMI, FLORIDA 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOSE ANTONIO GARCIA

17976 NW 68 AVE

MIAMI, FL 33015

Having bear 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

imature/Incorporator

11/12/2009

Date

11/12/2009

Date

SECRETARY OF STATE