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.

(((H100001762173)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

1 1

03

From:

Account Name : LAZARUS CORPORATE FILL.

Account Number : I20000000019

Phone : (305)552-5973

Fax Number : (305)220-1440

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

Tenni I	Address:
	ACCIOSS:

FLORIDA PROFIT/NON PROFIT CORPORATION AMERICAN DOLLAR PHARMACY CORP

Certificate of Status

Certified Copy

Page Count

Estimated Charge \$87.50

Electronic Filing Menu

Corporate Filing Menu WHITE

Help

H 1 0 0 0 0 1 7 62 17
ARTICLES OF INCORPORATION

FILED

20:0 AUG -4 P 2: 10

The undersigned Incorporator(s), for the purpose of forming a corporation under SSEE, FLO the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:

AMEXICAN DOLLAR PHARMACY CONS

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

5399 NW 36 Street Minni Springs FJ 37166

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV – INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Dixon Barcelo 5309 NW 36 Street miami Springs FL 33166 H10000176217

H10000176217

ARTICLE V - INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

EXTICLE VI- DIRECTOR (S)

The name(s) and street address (es) of the director(s) to these Articles of Incorporation is (are):

DIXAN BARCELO (P)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

Having been named as Registered Agent and to accept service of process for the above states corporation at place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes related to the proper and complete performance of my duties, and I am familiat with and accept the obligations of my position as Registered Agent.

Medistered Agent Signature

H10000176217

FILED