P10000078145

(Re	equestor's Name)					
(Address)						
(Ad	ldress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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10 SEP 24 PH 3: 24

SECRETARY OF STATE DIVISION OF CORPORATION

ST864-010

T. HAMPTON SEP 2 7 2010

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: PLAZA PHARMACY INC.
Name of Resulting Florida Profit Corporation
The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with 607.1115, F.S.
Please return all correspondence concerning this matter to:
CORT A. NEIMARK, ESQ.
Contact Person
FOWLER WHITE BURNETT P.A.
Firm/Company
100 S.E. THIRD AVENUE, SUITE 2100
Address
FORT LAUDERDALE, FL 33394
City, State and Zip Code
pferlise@americandiabetic.us
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
CORT A. NEIMARK at (954) 377-8114
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$105.00 Filing Fees
STREET ADDRESS: MAILING ADDRESS:
Registration Section Registration Section Division of Corporations Division of Corporations
Clifton Building P. O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301



One Financial Plaza
Suite 2100
100 Southeast Third Avenue
Fort Lauderdale, Florida 33394

www.fowler-white.com

Cort A. Neimark 954.377.8144 direct 954.315.1164 fax cneimark@fowler-white.com

September 23, 2010

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

Attention:

Tammy Hampton

Regulatory Specialist II

Re:

Plaza Pharmacy Inc.

Ref. Number: W10000042313

Dear Ms. Hampton:

Pursuant to your letter of September 17, 2010, copy of which is enclosed, we are returning the Certificate of Conversion, now properly signed by both the converting entity and the corporation.

If this filing is accepted, we would appreciate your processing same expeditiously so that it becomes available online at sunbiz.com so that we may confirm that Plaza Pharmacy Inc. is now validly in existence.

Should there be any problems, please contact my office by phone. Thank you.

Very truly yours,

FOWLER WHITE BURNETT P.A.

Cort A. Neimark

Enclosures

[ghf] W:\79027\LETTR677-dept state.CAN{9/23/10-13-14}



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 SEP 24 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

September 17, 2010

CORT A NEIMARK ESQ FOWLER WHITE BURNETT PA 100 SE THIRD AVE - STE 2100 FT LAUDERDALE. FL 33394

SUBJECT: PLAZA PHARMACY INC.

Ref. Number: W10000042313

We have received your document for PLAZA PHARMACY INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 110A00021410

Division of Corporations

RECEIVED

10 SEP 16 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

September 8, 2010

CORT A NEIMARK ESQ FOWLER WHITE BURNETT PA 100 SE THIRD AVE - STE 2100 FT LAUDERDALE, FL 33394

SUBJECT: PLAZA PHARMACY INC.

Ref. Number: W10000042313

We have received your document for PLAZA PHARMACY INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II

Letter Number: 110A00021410

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
PLAZA PHARMACY LLC
Enter Name of Other Business Entity
The "Other Business Entity" is a limited liability company (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on October 8, 2009 9/13/95
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
PLAZA PHARMACY INC.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

10 SEP 24 PM 3: 2

Signed this $\frac{3}{2}$	_day of/	August	, 20 10	_ •
Required Signature	e for Florida Profit	Corporation	<u>:</u>	
Signature of Chairm	an, Vice Chairman	irector, Offi	cer, or, if Directors or Offi	cers have no
Printed Name:	Stoven Betwein	Title	President	<u> </u>
Fillined Manie.	Staven Rutwelli	1 ide:	Liesideur	
Required Signature	(s) on behalf of Other	Business Er	ntity: [See below for requir	ed
signature(s).]	01			
1				
Signature:	er -		N1.1	
Printed Name:	Steven Rotwein	¹	litle: Manager	
Signature:				
Printed Name:		7	litle:	····
Signature:				·
Printed Name:		т	litle:	
01				
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Signature:				
Printed Name:		7	itle:	
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TERIANDO COMANAI D	lautaanskin an Tilusia	.d T in biliter T	Daut-auchtus	
Signature of one General	artnership or Limite	U LINDUILY I	artnersuip:	
Digitation of Otto Octiv				
If Florida Limited P	artnership or Limite	d Liability I	imited Partnership:	
Signatures of ALL G	eneral Partners.			
If Florida Limited L				
Signature of a fatching	er or Authorized Repr	esentative.		
All others:				
Signature of an author	rized person.			
_				
Fees:				
Certificate of	Conversion:	\$3	35.00	G
	ida Articles of Incorp	oration: \$'	70.00	Ĭ,
Certified Cop		\$	8.75 (Optional)	,
Certificate of	Status:	\$	8.75 (Optional)	£

18 CEB 21 PH 3: 24

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:

PLAZA PHARMACY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4399 NW 124TH AVENUE CORAL SPRINGS, FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

STEVEN ROTWEIN, 4399 NW 124th Avenue, Coral Springs, FL 33065 President, Director

PERRY FERLISE, 4399 NW 124th Avenue, Coral Springs, FL 33065 Secretary, Treasurer, Director

ARTICLE VI REGISTERED AGENT

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

PERRY FERLISE

4399 NW 124TH AVENUE

CORAL SPRINGS, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PERRY FERLISE

4399 NW 124TH AVENUE

CORAL SPRINGS, FL 33065

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this cartificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent

Signature/Incorporate

August /3, 2010

Date

August /3, 2010

Date

A CED 21 PM 3: 24