

P100000081779

Florida Department of State  
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.**

((H10000220003 3)))



H100002200033ABCI

**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

From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
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.\*\***

Email Address: \_\_\_\_\_

**FLORIDA PROFIT/NON PROFIT CORPORATION  
PALACE PHARMACY CORP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED  
10 OCT -6 PM 2:27  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

APPROVED  
AND  
FILED  
10 OCT -6 AM 11:33  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

H10000220003

10 OCT -6 AM 11:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

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

### ARTICLE I - NAME

The name of the corporation shall be:

Palace Pharmacy Corp

### ARTICLE II - PRINCIPAL OFFICE

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

10521 SW 40 ST  
Miami FL 33165

### 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:

Odalis Corrales  
10521 SW 40 ST  
Miami FL 33165  
H10000220003

H10000220003

APPROVAL  
AND  
FILED

10 OCT -6 AM 11:33

**ARTICLE V - INCORPORATOR**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

ODALYS CORRALES  
10521 SW 40ST  
MIAMI FL 33165

The undersigned incorporator has executed these Articles of Incorporation this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

  
\_\_\_\_\_  
Signature

**ARTICLE VI - DIRECTOR (S)**

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

ODALYS CORRALES (P)

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT**

**/REGISTERED OFFICE**

Having been named as Registered Agent and to accept service of process for the above stated 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 familiar with and accept the obligations of my position as Registered Agent.

  
\_\_\_\_\_  
Registered Agent Signature

H10000220003