

3/26/2014

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Division of Corporations

Florida Department of State

Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FLORIDA PROFIT/NON PROFIT CORPORATION****Medical America Pharma Services Inc.**

Certificate of Status	1
Certified Copy	0
Page Count	03
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Medical America Pharma Services Inc.

ARTICLE II PRINCIPAL OFFICE

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

2263 SW Boca Raton Boulevard, Suite 209
Boca Raton, FL 33431

ARTICLE III SHARES

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

1,500 Shares at No Par Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

David Poces
575 NW Browning Way
Boca Raton, FL 33432

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TALLAHASSEE FLORIDA

Prepared By:

Bruce B. Hubbard
77 East John St.
Hicksville, New York 11801
1-516-935-3940

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ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

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

David Poces - President/Director
575 NW Browning Way, Boca Raton, FL 33432

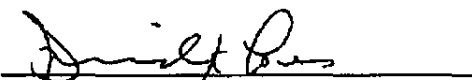
ARTICLE VI INCORPORATOR(S)

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

David Poces
575 NW Browning Way, Boca Raton, FL 33432

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

26th day of March 20 14



David Poces
Signature

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNA TING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: Medical America Pharma Services Inc.

2. The name and address of the registered agent and office is:

David Poces

Name

575 NW Browning Way

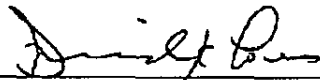
(P.O. Box or Mail Drop Box NOT Acceptable)

Boca Raton, FL 33432

(City / State / Zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 the statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

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TALLAHASSEE FLORIDA



David Poces
SIGNATURE

03/26/2014

(Date)

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