

Division of Corporations

P14000048596

Page 1 of 1

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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To: Division of Corporations
Fax Number : (850)617-6380

RE-SUBMIT

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

Phone Number : (850) 222-1092
date of submission 12/3

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

Email Address: _____

**REGISTERED AGENT CHANGE
GLADES DRUGS INC.**

Certificate of Status	0
Certified Copy	0
Page Count	834
Estimated Charge	\$35.00

RS/RO Change

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TALLAHASSEE, FLORIDA
14 DEC -3 AM 10:55**

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Corporate Filing Menu

Help

DEC - 5 2014

T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GLADES DRUGS INC.

Name of Corporation

DOCUMENT NUMBER: P14000048596

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

SANTO LEO

Name of Contact Person

GLADES DRUGS, INC.

Firm/Company

1095 BROKEN SOUND PKWY NW., SUITE 300

Address

BOCA RATON, FL 33487

City/State and Zip Code

SANTO@GLADESDRUGS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SANTO LEO

Name of Contact Person

561 902-7196

at () Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

12/4/2014 10:51:02 From: To: 8506176380

(2/4)

850-617-6381

12/4/2014 10:29:00 AM PAGE 1/001 Fax Server



December 4, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GLADES DRUGS INC.
FAX FILINGCT CORPORATION SYSTEM**
SUITE #300
BOCA RATON, FL 33487-3501US

SUBJECT: GLADES DRUGS INC.
REF: P14000048596

RE-SUBMIT

Please include the filing
date of submission 12/3

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

There is no comma in the entity name.

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) 245-6050.

Tina D Carter
Regulatory Specialist

FAX Aud. #: H14000278786
Letter Number: 814A00025521

RECEIVED

14 DEC -4 PM 3:03

OFFICE OF THE
CLERK OF THE
SUPREME COURT
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GLADES DRUGS INC.
2. The principal office address: 109 S LAKE AVE
PAHOKEE, FL 33476
3. The mailing address (if different): 1095 BROKEN SOUND PKWY. NW, SUITE 300
BOCA RATON, FL 33487
4. Date of incorporation/qualification: 11/19/1965 Document number: P14000048596
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (if resigned, enter resigned)
MICHAEL G. ST. JACQUES, II
2925 PGA BLVD., SUITE 204
PALM BEACH GARDENS, FL 33410
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
P.O. Box NOT acceptable
PLANTATION, FL 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

SANTO LEO-COO

Printed or typed name and title

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

12/03/2014

Date

If signing on behalf of an entity:

Michele Holden, Asst. Secretary

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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TALLAHASSEE, FLORIDA
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