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#748 P.001/01

FLORIDA DEPARTMENT OF REVENUE
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
FIRST SOLUTION PHARMACY CORP**

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

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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REC'D

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME: The name of the corporation is:First Solution Pharmacy Corp**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

5000 SW 97 CT
MIAMI FL 33165**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Assiel Lopez (P)

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Assiel Lopez
5000 SW 97 CT
MIAMI FL 33165**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Assiel Lopez
5000 SW 97 CT
MIAMI FL 33165

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Required Signatures:

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



Registered Agent

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Incorporator

Date

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