

08/28/2032 05:19

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
BLUE RX INC**

Certificate of Status	0
Certified Copy	1
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OCT. 16 2014

T. SCOTT

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

H14000241003

**ARTICLE I NAME:** The name of the corporation is:

Blue 2x inc

**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

8347 SW 40 STMiami FL, 33155

**ARTICLE III SHARES:** The number of shares of stock is: 100

**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**

Alberto M. 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:

ALBERTO M. LOPEZ8347 SW 40 STMIAMI FL 33155

**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:

ALBERTO M. LOPEZ8347 SW 40 STMIAMI FL 33155

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DIVISION OF CORPORATE AFFAIRS

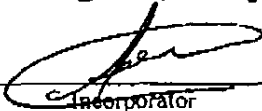
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**Required Signatures:**

**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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OCT 15 2032