

05/12/2033 05:30

#4851 F

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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Division of Corporations
Fax Number : (850)617-6381

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**FLORIDA PROFIT/NON PROFIT CORPORATION
OLIVERO PHARMACY CORP.**

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

JUL 1 2015

S. GILBERT

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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:Olivero Pharmacy Corp.**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

1428 E 4th Hialeah.FL 33010**ARTICLE III SHARES:** The number of shares of stock is: 100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**Pedro Olivero (P)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

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

Pedro Olivero1428 E 4 Ave.Hialeah FL 33010**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Pedro Olivero1428 E 4 AveHialeah FL 33010

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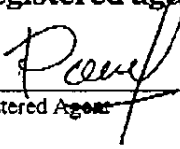
05/12/2033 05:30

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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



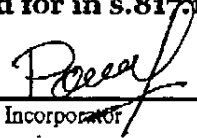
Registered Agent



Date

7/1/15

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

7/1/15

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