# 6000 4 (Requestor's Name) (Address) 100292148131 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 5 91 AG4 (Business Entity Name) (Document Number) çõ ယ် **Certified Copies** Certificates of Status Special Instructions to Filing Officer: 15 107 18 PH 5: 19 USACY OF F il ing

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DATE: 11/18/16

NAME: NESO PHARMACY INC.

**TYPE OF FILING:** ARTICLES

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## ARTICLES OF INCORPORATION

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

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## ARTICLE I NAME

The name of the corporation shall be:

## **NESO PHARMACY INC.**

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is :

# 614A MIDWAY DRIVE OCALA, FLORIDA 34472

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is to engage in any activity business permitted under the laws of the State of Florida.

#### ARTICLE IV SHARES

The number of shares of stock is: 1500 COMMON SHARES PAR VALUE \$0.01

#### ARTICLE V INITIAL OFFICERS / DIRECTORS

The name(s), address(es), and title(s) of the directors and officers is/are:

DIRECTOR, PRESIDENT & TREASURER: JULIUS EZEPUE 614A MIDWAY DRIVE OCALA, FLORIDA 34472

DIRECTOR, VICE-PRESIDENT & SECRETARY: PATRICIA KOSI EZEPUE 614A MIDWAY DRIVE OCALA, FLORIDA 34472

## PAGE 2 NESO PHARMACY INC.

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

# JULIUS EZEPUE 614A MIDWAY DRIVE OCALA, FLORIDA 34472

#### ARTICLE VII INCORPORATOR

The name and Florida street address of the incorporator is:

# JULIUS EZEPUE 614A MIDWAY DRIVE OCALA, FLORIDA 34472

Having been named as registered agent to accept service of process for the above 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.

JULI US / Registered Agent

NOV 18,2016 Dete

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*I* submit this document and affirm that facts stated herein are true. I am aware that any 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.

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that 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. I acknowledge that I have read the above "Notice of Annual Report" statement and understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

JULIUS EXEPUE / Incorporator

W 8,2016

Date