

P96000102259

ROBERT M. FRANKLIN, P.A.

CERTIFIED PUBLIC ACCOUNTANT

3300 N. UNIVERSITY DRIVE, SUITE 604
CORAL SPRINGS, FLORIDA 33065

City/State/Zip

Phone #

700002032627--1

-12/18/96--01073--013

****122.50 ****122.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Preferred Prescription Plan, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

96 DEC 18 AM 10:07

FILED

ARTICLES OF INCORPORATION
OF
PREFERRED PRESCRIPTION PLAN, INC.

FILED

96 DEC 18 AM 10:07

STATE
TALLAHASSEE, FLORIDA

The undersigned subscriber to these Articles of Incorporation, competent to contract, desiring to form a Corporation under Chapter 607 of the laws of the State of Florida, hereby makes, subscribes and acknowledges this certificate for that purpose as follows:

ARTICLE I - NAME

The name of this Corporation is Preferred Prescription Plan, Inc.

ARTICLE II - PURPOSE

The purpose for which this Corporation is formed is to engage in the marketing and sales of health, cosmetic and pharmaceutical supplies and prescriptions.

ARTICLE III - DURATION

This Corporation is to have perpetual existence.

ARTICLE IV - CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding is one thousand (1,000) shares of common stock of one dollar (\$1.00) par value.

ARTICLE V - ADDRESS OF PRINCIPAL OFFICE WITHIN FLORIDA

The initial street address of the principal office of this corporation within the State of Florida is:

2201 W. Sample Road, Bldg. 9 Suite 1A
Pompano Beach, Florida 33073

The Board of Directors may, from time to time, move the principal office to another address in Florida.

ARTICLE VI - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial Registered Office of this Corporation is :

3300 N. University Drive
Suite 604
Coral Springs, Florida 33065

The name of the initial Registered Agent of this Corporation is : Robert M. Franklin, CPA

ARTICLE VII - INITIAL BOARD OF DIRECTORS

This Corporation shall have one director initially. The number of directors may be changed from time to time by the by-laws but shall never be less than one at any time. The name and address of the initial director is :

Michael Davis
22691 Bella Rita Circle
Boca Raton, Florida 33433

ARTICLE VIII - INCORPORATOR

The name and address of the incorporator is:

Michael Davis
22691 Bella Rita Circle
Boca Raton, Florida 33433

ARTICLE IX - BY-LAWS

The power to adopt, alter, amend or repeal by-laws shall be vested in the Board of Directors and Shareholders.

ARTICLE X - AMENDMENT

This Corporation reserves the right to amend or repeal any provisions contained herein in the Articles of Incorporation or any amendment thereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE XI - INITIAL OFFICERS

The name and address of the initial officer of the corporation who shall hold office for the first year, or until their successors are elected is:

Michael Davis
22691 Bella Rita Circle
Boca Raton, Florida 33433

IN WITNESS THEREOF, the undersigned subscriber has executed these Articles of Incorporation this 12 day of DEC, 1996.

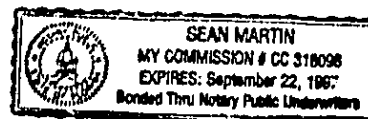
Signed: *Michael Davis*

STATE OF FLORIDA
COUNTY OF: Broward

BEFORE ME, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared Michael Davis known to be the person who executed the foregoing Articles of Incorporation and he has acknowledged before me that he executed these Articles.

IN WITNESS THEREOF, I have hereunto set my hand and seal in the State and County aforesaid this 12 day of Dec, 1996.

Signed: *Sean Martin*
NOTARY PUBLIC STATE OF FLORIDA
My Commission Expires:



CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR
SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON
WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.0505, Florida Statutes, the following is submitted in compliance with this act:

That Preferred Prescription Plan, Inc., desiring to organize under the laws of the State of Florida, with its Registered Office indicated in the Articles of Incorporation at:

3300 N. University Dr.
Suite 604
Coral Springs, Florida 33065

has named Robert M. Franklin, CPA as its agent to accept service of process within this state.

ACKNOWLEDGEMENT:

Having been named to accept Service of Process for the above stated Corporation, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provisions of this act relative to keeping open said office.

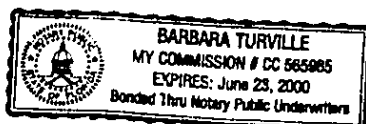
Signed: *Robert M. Franklin*

Robert M. Franklin, CPA

STATE OF FLORIDA
COUNTY OF:

I hereby certify that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgements, personally appeared Robert M. Franklin, CPA to me known to be the person described as Registered Agent in and who executed the foregoing Articles of Incorporation and who swore and acknowledged that he executed the foregoing Articles of Incorporation for the purpose therein set forth.

Witness my hand and official seal in the State and County last aforesaid this 16 day of Dec, 1996.



Barbara Turville
Notary Public, State of Florida
My Commission expires: