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TALLALA LE, FLÖRIÐA

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	American Dru			_
(Proposed corporate name - must include suffix)				
		<u></u>	900002165 -05/05/97- ****122.50	5 9496 -01098001) ****122.50
Enclosed is an origina	l and one(1) copy of the articles	s of incorporation and a	check for :	_
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	□ \$131.25 Filing Fee, Certified Copy & Certificate	
		ADDITIONAL CO	DPY REQUIRED	
FROM:		rinted or typed)		
	7905 5.W. 13th Street Address			
Miami Fla 33144 City, State & Zip				
(305) 264-3165 Daytime Telephone number				
			1,5	8/11

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

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The undersigned incorporator, for the purpose of forming a corporation under the Florida 20.12. Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation shall be American Drugs, Inc.

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be:

7905 S.W. 13# Street Miami, Fla 33144

SHARES ARTICLE III

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

one dollar (\$1.00) 100 shares of common stock,

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Rene Armas 1905 s.w. 134 street Miami, Fla. 33144

ARTICLE V **INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

Signature/Incorporator

7905 s. W. 35 Sheet

Miami, Ha! 53144

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent