

F03000006270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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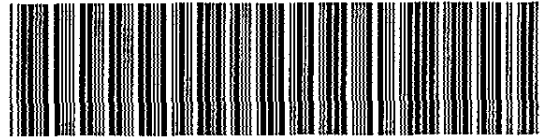
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PROFIT

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03 DEC 16 PM 2:51
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 361414 4390339

AUTHORIZATION : *Patricia Piguet*

COST LIMIT : \$ 70.00

03 DEC 17 AM 8:59
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : December 16, 2003

ORDER TIME : 12:46 PM

ORDER NO. : 361414-015

CUSTOMER NO: 4390339

CUSTOMER: Ms. Susan Lester
Caremark Rx, Inc.
Suite 1000
3000 Galleria Tower
Birmingham, AL 35244

FOREIGN FILINGS

NAME: CHOICE SOURCE THERAPEUTIC
SOUTH, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 1135

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 17, 2003

RESUBMIT

DARLENE WARD
CSC
TALLAHASSEE, FL

SUBJECT: CHOICE SOURCE THERAPEUTIC SOUTH, INC.
Ref. Number: W03000038372

FILED
DEC 17 AM 8:59
TALLAHASSEE, FLORIDA

We have received your document for CHOICE SOURCE THERAPEUTIC SOUTH, INC. and the authorization to debit your account in the amount of \$70.00. However, the document has not been filed and is being returned for the following:

Please have the R.A. sign Item 10.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Document Specialist

Letter Number: 703A00067467

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03 DEC 17 PM 12:49
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. Choice Source Therapeutic South, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Missouri 3. 43-1859307
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 7/19/99 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 11/1/03
(Date corporation first conducted Affairs in Florida - See sections 617.1501, 617.1502, and 817.155, F.S.)
7. NA
(Principal office address)
3000 Galleria Tower, Suite 1000, Birmingham, AL 35244
(Current mailing address)
8. Mail order sales of prescription drugs.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip Code)
10. Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company
Deborah D. Skipp
(Registered agent's signature) **Deborah D. Skipp,**
Asst. V. Pres
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: A.D. Frazier, Jr.

Address: 2211 Sanders Rd.

Northbrook, IL 60062

Vice Chairman: Howard A. McLure

Address: 2211 Commerce Street, 8th Floor

Nashville, TN 37201

Director: Sara J. Finley

Address: 2211 Commerce Street, 8th Floor

Nashville, TN 37201

Director:

Address:

B. OFFICERS

President: A.D. Frazier, Jr. - President & Treasurer

Address: 2211 Sanders Road

Northbrook, IL 60062

Vice President: Howard A. McLure - Vice President

Address: 2211 Commerce Street, 8th Floor

Nashville, TN 37201

Secretary: Sara J. Finley - VP & Secretary

Address: 2211 Commerce Street, 8th Floor Nashville, TN 37201

Treasurer: A.D. Frazier, Jr.

Address: 2211 Sanders Road, Northbrook, IL 60062

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Sara J. Finley
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Sara J. Finley, VP & Secretary
(Typed or printed name and capacity of person signing application)

STATE OF MISSOURI



Matt Blunt
Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

CHOICE SOURCE THERAPEUTIC SOUTH, INC.
00472115

was created under the laws of this State on the 19th day of July, 1999, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 11th day of December, 2003

A handwritten signature of Matt Blunt in cursive script.

Secretary of State