

F110000000198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2022 MAY -2 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED

2022 MAY -2 AM 11:00

SECRETARY OF STATE
TALLAHASSEE, FL 32399

of 5/17/2022

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 652733 8287480

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : May 2, 2022

ORDER TIME : 10:06 AM

ORDER NO. : 652733-040

CUSTOMER NO: 8287480

CHANGE OF AGENT

NAME: PHARMASOURCE INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2022

CORPORATION SERVICE COMPANY

SUBJECT: PHARMASOURCE INC.
Ref. Number: F11000000198

RESUBMIT
Please give original
submission date as file date.

We have received your document for PHARMASOURCE INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

Please correct the date of incorporation for the corporation.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 822A000101

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2022 MAY 16 PM 3:21

RECEIVED

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Pharma Source Inc.
2. The principal office address: 700 W. Hillsboro Blvd., Ste 101; Deerfield Beach FL 33441
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/13/2011 Document number: F11000000198
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Foulke, Marcellus Ellsworth

1000 MANSION DR

SILVER SPRING

MD 20910

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

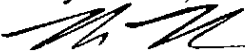
P.O. Box NOT acceptable

Tallahassee

FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Michael Knolker

Vice President

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: Alexis Weber Assistant Vice President
Signature of Registered Agent

05/16/2022

Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

FILED
2022 MAY -2 AM 11:00
TALLAHASSEE, FL
SECRETARY OF STATE