

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION NCS HEALTHCARE OF KENTUCKY, INC.

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	DIVINITATION CONTOUR CONTRACT TO A PERSONNEL CONTOUR C		5
IN COMPLIANCE REGISTER A FOL	E WITH SECTION 607.1303, FLORIDA S REIGN CORPORATION TO TRANSACT A	STATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDAL [1]	77 70 70
		₹	
1. NCS Healtho	are of Kentucky, Inc.	Y "COMPANY" "CORDORATION"	
	corporation; must include "INCORPORATED, forp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,	
no., co., c	orp, 1110, 00, w 00,p.		
	*		.n ⊃
(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Flor	ida)
2. Ohio	3.	31-1521217	*******
	under the law of which it is incorporated)	(FEI number, if applicable)	
4, 1/31/1997	5,	perpetual	
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetua	al")
6	Upon Filing		
O		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	illian
7. 835 North L. I	Rogers Wells Blvd., Glasgow, KY 421		
	(Principal office add		
900 Omnicare	Center, 201 E. Fourth Street, Cincinna	nati, OH 45202	
***************************************	(Current mailing add	dress)	********
g. To provide ph	armaceuticals and other lawful busines	ss	
(Purpose(s	s) of corporation authorized in home state or co	country to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: (P.C	O. Box NOT acceptable)	
Name:	Corporation Service Company	***************************************	
Office Address:	1201 Hays Street	·····	
	Tallahassee	, Florida 32301	
	(City)	(Zip code)	
Having been nam designated in this further agree to c and I am familiar	application, I hereby accept the appoints	vice of process for the above stated corporation at a tement as registered agent and agree to act in this crelative to the proper and complete performance of osition as registered agent.	apacity. I
<u>. F</u>	34: Stephanie Milnes	2 Asst V.P	

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 business addresses of officers and/or directors:	~ <i>i</i>
A. DIRECTORS	12 SE
Chairman: James Cialdini	FG 8
Address: 201 E. 4th Street, Cincinnati, OH 45202	表完 卫 五
Vice Chairman: Regis T. Robbins	
Address: 201 E. 4th Street, Cincinnati, OH 45202	
Director: Jonathan D. Kukulski	
Address: 201 E. 4th Street, Cincinnati, OH 45202	
Director:	,
Address:	•
B. OFFICERS	
President: James Cialdini	
Address: 201 E. 4th Street, Cincinnati, OH 45202	
Vice President:	
Address:	
Secretary; Jonathan D. Kukulski	
Address: 201 E. 4th Street, Cincinnati, OH 45202	
Treasurer: Regis T. Robbins	
Address: 201 E. 4th Street, Cincinnati, OH 45202	
NOTE: If necessary, you may attach an addendum to the application listing additional officers Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms the	and/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depart third degree felony as provided for in s.817.155, F.S.	at the facis stated herein
14. Jonathan D. Kukulski, Secretary	

United States of America State of Ohio Office of the Secretary of State

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show NCS HEALTHCARE OF KENTUCKY, INC., an Ohio corporation, Charter No. 967241, having its principal location in Beachwood, County of Cuyahoga, was incorporated on January 31, 1997 and is currently in GOOD STANDING upon the records of this office.

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SECRETARY OF STATE
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Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 13th day of September, A.D. 2012

Ohio Secretary of State