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Florida Department of State
Division of Corporations
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FOREIGN PROFIT/NONPROFIT CORPORATION
Contract Pharmacy Services, Inc.

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5/21/13

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Contract Pharmacy Services, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Pennsylvania 3. 23-2013561
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/22/1976 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon Filing
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 125 Titus Avenue, Warrington, Pennsylvania 18976
(Principal office address)

125 Titus Avenue, Warrington, Pennsylvania 18976
(Current mailing address)

8. All lawful business
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Business Filings Incorporated
Office Address: 515 E. Park Avenue,
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.

Mark Williams Mark Williams, AVP, Business Filings Incorporated
(Registered agent's signature)

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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Wayne Shafer

Address: 139 Peggy Lane, Chalfont, Pennsylvania 18914

Director: _____

Address: _____

B. OFFICERS

President: Wayne Shafer

Address: 139 Peggy Lane, Chalfont, Pennsylvania 18914

Vice President: Jean Shafer

Address: 139 Peggy Lane, Chalfont, Pennsylvania 18914

Secretary: Jean Shafer

Address: 139 Peggy Lane, Chalfont, Pennsylvania 18914

Treasurer: Wayne Shafer

Address: 139 Peggy Lane, Chalfont, Pennsylvania 18914

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

13.  5/14/2013
(Signature of Director or Officer listed in number 12 of the application)14. Wayne Shafer, President
(Typed or printed name and capacity of person signing application)

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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

MAY 15, 2013

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TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

CONTRACT PHARMACY SERVICES, INC.

Is duly incorporated as a Pennsylvania Corporation under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

A handwritten signature in cursive script, appearing to read "Carol Aichele".

Secretary of the Commonwealth

Certification Number: 11075006-1

Verify this certificate online at <http://www.corporations.state.pa.us/corp/soskb/verify.asp>