# F1600002401

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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#### . COVER LETTER

TO: Amendment Section Division of Corporations	
Valley Campus Pharmacy, Inc. SUBJECT:	
Name	of Corporation
DOCUMENT NUMBER: F16000002407	
The enclosed Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning	g this matter to the following:
Julia Black	
Name of Contact Person	
Diplomat Pharmacy, Inc.	
Firm/Company	
4100 S. Saginaw St.	
Address	<del></del>
Flint, MI 48507	
City/State and Zip Code	
. Stateregistrations @ diplomation	2
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this mat	ter, please call:
Julia Black	at ( ) 768-9172 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amous	nt:
x \$35.00 Filing Fee S43.75 Filing Fee & Certificate of Status	
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	· — — · · · · · · · · · · · · · · · · ·

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

		CTION I BE COMPLETED)	をできる。
	F16000002407		721
	(Document numbe	r of corporation (if known)	- Series - M
Valley Campus Pharmacy, Inc.			F: 2
·	e of corporation as it appears	on the records of the Department	of State) E- CT
2. California		3 05/25/2016	
(Incorporated	under laws of)	(Date authorized	to do business in Florida)
	S.F.	CTION II	
		THE APPLICABLE CHANGES	)
4. If the amendment changes the	he name of the corporation	on, when was the change effe	ected under the laws of
its jurisdiction of incorpora	tion? 08/07/2017		
5. Diplomat Specialty Pharmacy of I			
(Name of corporation after appropriate abbreviation, i	he amendment, adding s f not contained in new na	suffix "corporation," "compa ame of the corporation)	iny," or "incorporated," or
(If new name is unavailable business in Florida)	in Florida, enter alternate	e corporate name adopted for	the purpose of transacting
6. If the amendment changes t	he period of duration, inc	dicate new period of duration	1.
	- (Ne	ew duration)	_
7. If the amendment changes the	•	,	tion.
	(New	v jurisdiction)	_
8. Attached is a certificate or d 90 days prior to delivery of having custody of corporate	locument of similar important the application to the De records in the jurisdiction	ort, evidencing the amendme partment of State, by the Secon under the laws of which it	nt, authenticated not more than cretary of State or other official is incorporated.
	T. No.		
	of a receiver or other court	sident or other officer - if in the ha appointed fiduciary, by that fiduci	ary)
(Typed or printed nar	me of person signing)	(Title of p	crson signing)



#### Secretary of State Statement of Information

29

SI-550

(California Stock, Agricultural Cooperative and Foreign Corporations)

IMPORTANT — Read instructions before completing this form.

Fees (Filing plus Disclosure) - \$25.00;

Copy Fees – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

 Corporation Name (Enter the exact name of the corporation as it is currently recorded with the California Secretary of State)

Diplomat Specialty Pharmacy of Los Angeles County, Inc.

FILED

Secretary of State State of California

AUG 31 2017

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2. 7-Digit Secretary of State File Number

C3136408

3. Business Addresses

B. Street Address of Principal Executive Office - Do not list a P.O. Box 4100 5. Saginaw Street	City (no abbreviations)	State MT	Zip Code 48 <b>50</b> 7
b Mailing Address of Corporation, if different than Item 3a 4100 S. Saginaw Street	City (no abpreviations) Flint	State MI	Zip Code 48507
c Street Address of Principal California Office, if any and if different than item 3a - Oo not list a P.O. Box 15211 Vanownen St., Suite 301	City (no abbreviations) Van Nuys	State CA	Zip Code 91405

4. Officers		inted to list all three of the officer e added; however, the preprinted			This Ourcer	and Unier
S. Chief Executive Officer/ Joel	First Name	Middle Name Last Name Saban			Suffix	
Address 4100 S. Saginaw Street			City (no abbrevial Flint		ata Zip Co 41 485	
b. Secretary Philip	First Name	Middle Name	Last Nan Hage			Suffix
Acdress 4100 S. Saginaw Street			City (no abbrevial Flint	tions) Sta		_
c. Chief Financial Officer/ Philip	First Name	Middle Name	Last Nan Hage	•		Suffix
Address 4100 S. Saginaw Stree			City (no abbreviat	· ·	ate Zip Co	

Corporation has additional directors, enter the name(s) and addresses on Form SI-550A (see instructions)				
a. First Name Philip	Middle Name	Last Name Hagerinar	<u> </u>	Suffix
4100 S. Saginaw Street		City (no appreviations)	State Zip Co MI 48	507
b. Number of Vacancies on the Board of Directors, if any	<u></u>			

6. Agent for Service of segent's service of segent's

Item 6a and 6b: If the agent is an Individual, the agent must reside in California and Item 6a and 6b must be completed with the agent's name and California address, Item 6c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 6c must be completed (leave Item 6a-6b blank).

California Stock and Agricultural Cooperative Corporations ONLY. Item 6a: At least one name and address must be listed. If the

a California Agent's First Name (if agent is not a corporation)

Middle Name

Last Name

Last Name

Suffix

CA

City (no abbreviations)

CA

CA

C California Registered Corporate Agent is Name (if agent is a corporation) – Do not complete item 5a or 6b

Corporation Service Company which will do business in California as CSC-Lawyers Incorporating Service

C | 592199

7. Type of Business

Describe the type of business or services of the Corporation Specialty Pharmacy

8. The Information contained herein, including in any attachments, is true and correct.

5-14-17

Philip Hagerman

Type or Print Name of Person Completing the Form

Secretary

Title

016 California Secretary of State www.sos.ca.gov/business/5e

SI-550 (REV 11/2016)





# **Secretary of State**

AMDT-STK-NA

Certificate of Amendment o Articles of Incorporation		
Name Change Only - Stock		

**FILED** Secretary of State State of California

AUG 0.7 2017 C~

IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$30.00

Copy Fees - First Page \$1.00 & .50 for each attachment page; Certification Fee - \$5.00

1. Corporation Name (Enter the exact name of the corporation as it currently is recorded with the California Secretary of State.)

Valley Campus Pharmacy, Inc.

3. New Corporation Name

This Space For Office Use Only

2. 7-Digit Secretary of State File Number

C3136408

Enter the number, letter or other designation assigned to the provision in the Articles of Item 3a: Incorporation being amended (e.g., "I," "First," or "A"). See Instructions if the provision in the Articles of Incorporation being amended does not include a number, letter, or other designation. Any attachment is made part of this document.

100

Item 3b: Enter the new corporate name.

l	Article of the Articles of Incorporation is amended to read as shown in Item 3b below:
3b.	The name of the corporation is Diplomat Specialty Pharmacy of Los Angeles County, Inc.
)	
	<del></del>
4. Ap	proval Statements
<b>4</b> a.	The Board of Directors has approved the amendment of the Articles of Incorporation.
4b.	Shareholder approval was (check one):
	By the required vote of shareholders in accordance with California Corporations Code section 902. The total number of outstanding shares of the corporation is The number of shares voting in favor of the amendment equaled or exceeded the vote required. The percentage vote required was more than 50%.
	Not required because the corporation has no outstanding shares.

5. Read, sign and date below (See instructions for signature requirements. Note: Both lines must be signed.)

We declare under penalty of perjury-under the laws of the State of California that the matters set forth herein are true and correct of our own knowledge and we are authorized by California law to sign.

	11/1/2017	/ * * * * * * * * * * * * * * * * * * *
Date	- 7	Signature
		CAIA DI
	7-20-17	HALL KAL
Date		Signature

Paul Urick Type or Print Name of President

→Philip Hagerman Type or Print Name of Secretary

AMDT-STK-NA (EST 09/2016)

2016 California Secretary of State www.sos ca gov/business/be

#### CONSENT IN LIEU OF SPECIAL MEETING OF THE SHAREHOLDER AND DIRECTORS OF VALLEY CAMPUS PHARMACY, INC.

July \_\_\_, 2017

The undersigned constitute the sole shareholder (the "Shareholder") and all of the members of the board of directors (the "Directors") of Valley Campus Pharmacy, Inc., a California corporation (the "Company"). By execution of this Consent, the Shareholder and Directors hereby consent to and authorize the actions of the Company set forth in this Consent:

#### I. <u>Amendment of Articles of Incorporation.</u>

RESOLVED, that the name of the Company shall be changed to Diplomat Specialty Pharmacy of Los Angeles County, Inc., effective as of the date the Certificate of Amendment is filed with the California Secretary of State.

FURTHER RESOLVED, that the registration of a fictitious name shall be filed with the Los Angeles County Registrar-Recorder/County Clerk for Diplomat Specialty Pharmacy.

#### Π. Miscellaneous.

FURTHER RESOLVED, that each officer is authorized and directed to execute and deliver such other agreements, certificates, instruments, notices, filings and additional documents, and to take such other steps and to do such other acts and things, as in his judgment may be necessary, appropriate or desirable in order to carry out the intent of the foregoing resolutions;

FURTHER RESOLVED, that any and all actions taken by the Shareholder or Directors in connection with and in furtherance of the matters referred to in any of the foregoing resolutions are hereby ratified, confirmed, approved, and adopted in all respects; and

FURTHER RESOLVED, that these resolutions may be executed in counterparts, each of which constitutes an original, and all of which, taken together, constitute one and the same original, and facsimile signatures on these resolutions shall be deemed to constitute original signatures.

IN WITNESS WHEREOF, the undersigned have executed the foregoing Consent in lieu of Special Meeting of the Shareholder and Directors of Valley Campus Pharmacy, Inc.

#### SOLE SHAREHOLDER:

Diplomat Pharmacy, Inc.

Name. Philip Hagerman

Title: Chief Executive Officer

**BOARD OF DIRECTORS:** 

Philip Hagerman

Paul Urick

### CONSENT IN LIEU OF SPECIAL MEETING OF THE SOLE SHAREHOLDER OF DIPLOMAT SPECIALTY PHARMACY OF LOS ANGELES COUNTY, INC.

August 7, 2017

The undersigned, being the sole shareholder of Valley Campus Pharmacy, Inc. (the "Company"), does hereby adopt the following resolutions by written consent in lieu of a special meeting:

WHEREAS, Paul Urick has resigned as a member of the Board of Directors of the Company, effective as of the date set forth hereof.

RESOLVED, that Joel Saban is hereby elected to serve as a member of the Board of Directors of the Company until his successor shall be duly elected or qualified or until his earlier death, resignation, or removal.

RESOLVED, that each of the members of the Board of Directors of the Company is authorized and directed to execute and deliver such other agreements, certificates, instruments, notices, filings, and additional documents, and to take such other steps and to do such other acts and things, as in his judgment may be necessary, appropriate, or desirable in order to carry out the intent of the foregoing resolutions.

RESOLVED, that any and all actions taken in connection with and in furtherance of the matters referred to in any of the foregoing resolutions are hereby ratified, confirmed, approved, and adopted in all respects.

IN WITNESS WHEREOF, the undersigned has executed this Consent in Lieu of Special Meeting of the Sole Shareholder as of the date first set forth above.

As to Shareholder approval: DIPLOMAT PHARMACY, INC.

Philip R/ Hagerman, CE

## CONSENT IN LIEU OF SPECIAL MEETING OF THE BOARD OF DIRECTORS OF DIPLOMAT SPECIALTY PHARMACY OF LOS ANGELES COUNTY, INC.

#### August 7, 2017

The undersigned, being all of the members of the Board of Directors of Valley Campus Pharmacy, Inc. (the "Company"), do hereby adopt the following resolutions by written consent in lieu of a special meeting:

WHEREAS, Paul Urick has resigned as President of the Company, effective as of the date set forth hereof.

RESOLVED, that Joel Saban is hereby elected to hold the office of President until his successor shall be duly elected or qualified or until his earlier death, resignation, or removal

RESOLVED, that each of the officers of the Company is authorized and directed to execute and deliver such other agreements, certificates, instruments, notices, filings and additional documents, and to take such other steps and to do such other acts and things, as in his judgment may be necessary, appropriate or desirable in order to carry out the intent of the foregoing resolutions.

RESOLVED, that any and all actions taken in connection with and in furtherance of the matters referred to in any of the foregoing resolutions are hereby ratified, confirmed, approved, and adopted in all respects.

[Signature page follows]

IN WITNESS WHEREOF, the undersigned has executed this Consent in Lieu of Special Meeting of the Board of Directors as of the date first set forth above.

Joel Saban

Philip Hagerman

[Signature page to Board Resolutions of Diplomat Specialty Pharmacy of Los Angeles County, Inc.]