2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Sep 17, 2007
Secretary of State

DOCUMENT# L01000005333

Entity Name: UNITED MAIL PHARMACY SERVICE, L.C.

Current Principal Place of Business:

800 E. HALLANDALE BEACH BLVD
18
HALLANDALE BEACH, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

800 E. HALLANDALE BEACH BLVD.
SUITE # 18
HALLANDALE BEACH, FL 33009 US

New Mailing Address:

FEI Number: 65-1109717 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ELLSWORTH, SEAN
404 WASHINGTON AVENUE
SUITE 750
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

PLOTKA, EVAN
210 NORTH UNIVERSITY DRIVE
SUITE 301
CORAL SPRINGS, FL 33071 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EVAN PLOTKA 09/17/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ANTONIONI, DINO
Address: 800 E. HALLANDALE BEACH BOULEVARD
City-St-Zip: HALLANDALE BEACH, FL 33009 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DINO ANTONIONI MGR 09/17/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date