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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

AL

LIMITED LIABILITY COMPANY

Scor RX, LLC

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|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
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FAX AUDIT # 1100001101204CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **Scor RX, LLC**

The name and address of the registered agent and office is Business Filings Incorporated,
1000 West Avenue, Suite 1114, Miami Beach, Florida 33139. Located in the County of
Miami-Dade.

Having been named as registered agent and to accept service of process for the above
stated corporation at the place designated in this certificate, 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 relating to the proper and complete
performance of my duties, and I am familiar with and accept the obligations of my
position as registered agent.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature: 
Business Filings Incorporated, Richard Oster, V.P.

Date: November 30, 2001

FAX AUDIT #

11010001181204