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FILED  
2002 JUL 17 PM 1:21  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 667258 3360B

AUTHORIZATION :

*Patricia Pigato*

COST LIMIT : \$ 155.00

ORDER DATE : July 17, 2002

ORDER TIME : 2:54 PM

ORDER NO. : 667258-005

CUSTOMER NO: 3360B

CUSTOMER: Ms. Kimberly I. Wagner  
Ruden McClosky Smith Schuster  
& Russell  
Barnett Tower, Suite 1900  
701 Brickell Avenue  
Miami, FL 33131

RECEIVED  
02 JUL 17 PM 4:00  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: CC PHARMACY SERVICES OF WEST  
PALM BEACH, LLC

EFFECTIVE DATE:

600006475316--7

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - EXT. 1114

EXAMINER'S INITIALS: \_\_\_\_\_

J. BRYAN JUL 18 2002

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
CC PHARMACY SERVICES OF WEST PALM BEACH, LLC  
a Florida limited liability company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida does set forth the following:

1. NAME. The name of the limited liability company is CC Pharmacy Services of West Palm Beach, LLC (the "Company").
2. PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: 3 Pelican Isle, Ft. Lauderdale, Florida 33301.
3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization is Leslie Steinger of 3 Pelican Isle, Ft. Lauderdale, Florida 33301.
4. MANAGEMENT. The Company is to be managed by one or more managers, and therefore is a manager-managed company.

The undersigned has executed these Articles of Organization on the 15 day of July 2002.

CC PHARMACY SERVICES OF  
WEST PALM BEACH, LLC

By: \_\_\_\_\_

Leslie Steinger

**CERTIFICATION OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: CC Pharmacy Services of West Palm Beach, LLC.
2. The name and address of the registered agent and office is:

Leslie Steinger  
3 Pelican Isle  
Ft. Lauderdale, Florida 33301

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in its 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.*

\_\_\_\_\_  
Leslie Steinger

\_\_\_\_\_  
(Date)

7/12/02

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