03 DE 16 PM 3: 44 LA 12/26

1. DOCUMENT # L02000019309

Name and Mailing Address

Managing Member/Manage

0000913 01 AV 0.278 **AUTO H5 0 0615 33431-738299 MEDS UNLIMITED, LLC 2255 GLADES ROAD, SUITE 200E BOCA RATON FL 33431-7382

7200



REINSTATEMENT 2. New Malling Address City, State, Zip			4. State/Country of Formation FL 5. Date Organized or Qualified To Do Business in Florida 07/31/2002		
,* 	City, State, Zip		7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
LEGALZOOM MEVADA INC 111 N.E. FIRST STREET SUITE 901 MIAMI FL 33132		Name Montgomery L Byers Jr. Street Address (P.O. Box/Aumber is Not/Acceptable)			
		City Delray Beach FL 333945			
I, being appointed the registered a gnature of egistered Agent	SIGN///JIVE REQUIRESTERS AGENT MUST SIG	IRED	/accept the obligations of Chapter 608, F.S. Date $\frac{12}{11}$		
. Names and Street Addresses of Ea	ach Managing Member Merlager				
Members		Street Address of Each fanaging Member/Manage	city / State / Zip		
P Byers, Montgo	omery L. Jr. III Eas	st Lee Rd	Delrey Beach, Fr. 33	945	
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REINSTAT	2003	· 			
THE STATE OF THE S	EMEM.				
	the reason for dissolution has been eliminated		cation as provided for in chapter 608, F.S. I further certi	.S., and that	