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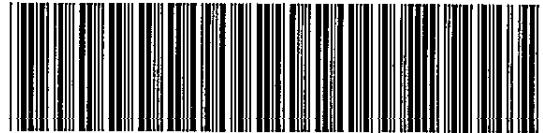
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ACCOUNT NO. : 072100000032

REFERENCE : 837832 121767A

AUTHORIZATION : *Patricia Pizeto*

COST LIMIT : \$125.00

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ORDER DATE : November 27, 2002

ORDER TIME : 3:43 PM

ORDER NO. : 837832-005

CUSTOMER NO: 121767A

CUSTOMER: Brad K. Saunders, Esq.  
Karp & Genauer, P.a.  
Suite 1202  
2 Alhambra Plaza  
Coral Gables, FL 33134

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DOMESTIC FILING

NAME: DRUGCLOUD, LLC

EFFECTIVE DATE:

       ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore - EXT. 1147

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

ARTICLES OF ORGANIZATION  
OF  
DRUGCLOUD, LLC

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ARTICLE I

The name of the limited liability company formed hereby is Drugcloud, LLC (the "Limited Liability Company").

ARTICLE II

The duration of the Limited Liability Company shall be perpetual.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company shall be as follows:

6356 Manor Lane  
Suite 101  
Miami, Florida 33143

ARTICLE IV

The Registered Agent of the Limited Liability Company and its street address in the State of Florida are as follows:

Alhambra Registered Agents, Inc.  
2 Alhambra Plaza  
Suite 1202  
Coral Gables, Florida 33134

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ARTICLE V

The Limited Liability Company shall be manager-managed.

ARTICLE VI

These Articles of Organization shall be effective as of November 27, 2002.

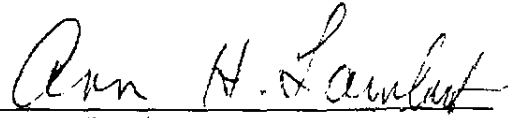
By: 

Brad K. Saunders, Esq.,  
as Authorized Representative of the Members

STATE OF FLORIDA                    )  
  ) ss:  
COUNTY OF MIAMI-DADE         )

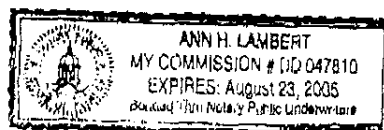
Before me personally appeared Brad K. Saunders, Esq., as Authorized Representative of the Members, ☒ who is personally known to me, or ☐ who produced \_\_\_\_\_ as identification, to be the person who executed the foregoing Articles of Organization.

In witness whereof I have hereunto set my hand and official seal this 27<sup>th</sup> day of November, 2002.

  
Notary Public

Print Name: Ann H. Lambert

My Commission expires:



CERTIFICATE OF DESIGNATION  
OF RESIDENT AGENT AND  
ACCEPTANCE OF DESIGNATION

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Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

1. The name of the limited liability company is Drugcloud, LLC.
2. The name and address of the Registered Agent and Office is:

Alhambra Registered Agents, Inc.  
2 Alhambra Plaza  
Suite 1202  
Coral Gables, Florida 33134

Having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in the 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 am familiar with and accept the obligations of my position as Registered Agent.

ALHAMBRA REGISTERED AGENTS, INC.

By: Joel J. Karp  
Joel J. Karp, its President

Dated: November 27, 2002

Drugcloud, LLC

By: Brad K. Saunders  
Brad K. Saunders, Esq.,  
as Authorized Representative  
of the Members