

Division of Corporations

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Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : KANETSKY, MOORE & DEBOER, P.A.
Account Number : 075350000267
Phone : (941) 485-1571
Fax Number : (941) 484-7226

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TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

Pharma Delivery Systems, LLC

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DIVISION OF CORPORATION

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ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
03 JAN 16 AM 8 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

PHARMA DELIVERY SYSTEMS, LLC

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

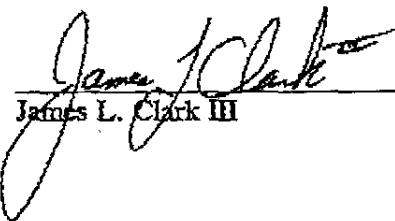
1143 Mallard Marsh Drive
Osprey, FL 34229

ARTICLE III - Registered Agent, Registered Office, & Registered Agents's Signature:

The name and street address of the registered agent are:

James L. Clark III
1143 Mallard Marsh Drive
Osprey, FL 34229

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 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 AS PROVIDED FOR IN CHAPTER 608, F.S.

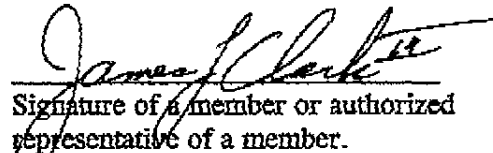

James L. Clark III

This instrument prepared by:
Erik R. Lieberman, Esq.
P. O. Box 1767
Venice, FL 34284-1767
941-485-1571
FL Bar #393053

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ARTICLE IV - Management (Check Box if Applicable)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company


Signature of a member or authorized
representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

James L. Clark III

Typed or Printed Name of Signer

FILED
03 JAN 16 AM 8:12
CLERK OF COURT
ALACHUA COUNTY, FLORIDA

This instrument prepared by:
Erik R. Lieberman, Esq.
P. O. Box 1767
Venice, FL 34284-1767
941-483-1571
FL Bar #393053