

03-27-2009

01:51 PM

FROM: B R V O G E L, P.A.

+3053736036

T-025

P.001/003

F-334

L0300 0017756

**Florida Department of State
Division of Corporations
Public Access System**

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000068057 3)))



H090000680573ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BERMAN, RENNERT, VOGEL & MANDLER, P.A.
Account Number : 076103002011
Phone : (305) 577-4177
Fax Number : (305) 373-6036

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

COMMCARE PHARMACY - WPB, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$60.00

RECEIVED

09 MAR 27 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAR 27 AM 8:28

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

T. HAMPTON

MAR 30 2009

EXAMINER

3/23/2009

FAX AUDIT NO. H09000068057 3

**AMENDED AND RESTATED ARTICLES OF ORGANIZATION
OF
COMM CARE PHARMACY - WPB, LLC**

The undersigned, being authorized to execute and file these Amended and Restated Articles of Organization of Commcare Pharmacy - WPB, LLC pursuant to Section 608.411, Florida Statutes, hereby certifies that:

FIRST: The limited liability company was originally formed under the laws of the State of Florida on May 16, 2003 under the name AGIRA PMG, LLC

SECOND: That the Articles of Organization of the limited liability company shall be amended and restated to read in full as follows:

ARTICLE I - NAME

The name of the limited liability company is: Commcare Pharmacy - WPB, LLC.

ARTICLE II - ADDRESS

The mailing address of the limited liability company is 2817 East Oakland Boulevard, Suite 303, Fort Lauderdale, Florida 33306.

The street address of the principal office of the limited liability company is: 1689 Forum Place, West Palm Beach, Florida 33401.

ARTICLE III - REGISTERED AGENT AND OFFICE

The name and Florida street address of the registered agent is of the limited liability company is: Registered Agents of Florida, LLC, 100 S.E. Second Street, Suite 2900, Miami, Florida 33131.

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 608, F.S.

REGISTERED AGENTS OF FLORIDA, LLC

By: _____

Charles J. Rennert
Charles J. Rennert, Vice President

FAX AUDIT NO. H09000068057 3

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 27 AM 8:28

03-27-2009 01:51PM FROM-B R V & M. P.A.

+3053736036

T-923 P.003/003 F-334

FAX AUDIT NO. H09000068057 3

The undersigned member has executed these Amended and Restated Articles of Organization this 27 day of March, 2009.



Nicholas M. Saraniti, Member

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

K:\CD\2009\17 - Open\Commcare Pharmacy Corp\Commcare WFB - A&R Articles of Organization DOC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 27 AM 8:28

FAX AUDIT NO. H09000068057 3