

Sent By: Gilligan, King, Gooding;  
Division of Corporations

352 867 0237

May-27-03 2:37PM;

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

From: Account Name : GILLIGAN, KING & GOODING, P.A.  
Account Number : I20010000016  
Phone : (352) 867-7707  
Fax Number : (352) 867-0237

**LIMITED LIABILITY COMPANY**

Canadian Discount Meds, L.L.C.

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 01       |
| Estimated Charge      | \$125.00 |

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Sent By: Gilligan, King, Gooding;  
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352 867 0237;

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APPROVED  
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03 MAY 27 AM 8:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: Canadian Discount Meds, L.L.C.

ARTICLE II - Address

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

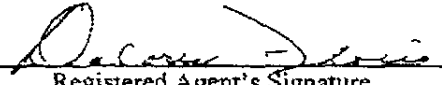
4360 NW 76 Court  
Ocala, Florida 34482

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

The name and the Florida street address of the registered agent are:

Name: Dolores Florio  
Florida street address: 4360 NW 76 Court  
City, State, and Zip: Ocala, Florida 34482

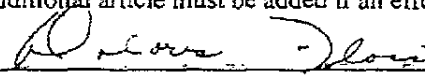
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all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

  
Registered Agent's Signature

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.

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a 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.)

Dolores Florio  
Typed or printed name of signee

E:\G:\Florio\Canadian Discount Meds\Articles of Organization.doc

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AND  
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TALLAHASSEE, FLORIDA