

W040000087191

00789-02826-00671 10/4 (eff date 8/11)

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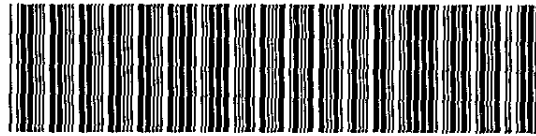
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

OCT-4 PM 12:23

FILED

W04-87191
OR

W04-32809



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 6, 2004

MICHAEL S. SAUTMAN
P.O. BOX 210911
WEST PALM BEACH, FL 33421-0911

SUBJECT: PHARMACEUTICAL DISPENSARIES & RESOURCES OF
AMERICA, LLC
Ref. Number: W04000036809

We have received your document for PHARMACEUTICAL DISPENSARIES & RESOURCES OF AMERICA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 4, 2004. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 504A00057968

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

September 20, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327,
Tallahassee, FL 32314

SUBJECT: PHARMACEUTICAL DISPENSARIES & RESOURCES of AMERICA, LLC

Enclosed is an original and one (1) copy.

Filing fee for articles of organization of Florida Limited Liability Company:

\$100.00	Filing fee for Articles of Organization
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy
\$ 5.00	Certificate of Status
_____	A letter of acknowledgement will be issued free of charge upon filing.
<u>\$160.00</u>	

A check for the total amount of \$160.00 made payable to the Florida Department of State is enclosed.

FROM: Michael S. Sautman
P.O. Box 210911
West Palm Beach, FL 33421-0911
(561) 792-9396

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Initial Articles of Organization for a Florida Limited Liability Company

Article I – Name:

The name of the Limited Liability Company is:

PHARMACEUTICAL DISPENSARIES & RESOURCES of AMERICA, LLC

Article II – Purpose: The purpose of the Limited Liability Company is to acquire, prepare, distribute pharmaceuticals & medical supplies, and provide services.

Article III – Addresses:

The mailing address of the Limited Liability Company is:

P.O. Box 210911, West Palm Beach, Florida 33421-0911

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

6900 SW 21st Court, Unit #2, Davie, Florida 33317

Article IV – Registered Agent, Registered Office, & Registered Agent's Signature:

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

**Michael S. Sautman
6900 SW 21st Court, Unit #2
Davie, Florida 33317**

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.

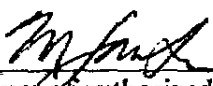


Registered Agent's Signature

Article V – Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager, Managed Company.

Article VI – Effective Date: October 1, 2004



Signature of authorized member
Michael S. Sautman

(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.)

Filing Fees: \$100.00 Filing Fee for Articles, \$25.00 Designation of Registered Agent,
\$30.00 Certified Copy, \$5.00 Certificate of Status

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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