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To:

Div. sion of Corporations

Pax Number :

: (850)205-0383

From

Account Name : ARAZOZA, COMAS, DE TORRES & FERNANDEZ-FRAGA, P.A.

Account Number: 075624003440

Phone : (305)444-6226 Fax Number : (305)442-4829

OF DEC 29 AM 10: 58
VISION OF CORFORATION

LIMITED LIABILITY COMPANY

SEDANOS PHARMACY MANAGEMENT, LLC.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION

OF

SEDANOS PHARMACY MANAGEMENT, LLC.

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I NAME

The name of this I imited Liability Company is: SEDANOS PHARMACY MANAGEMENT, LLC.

ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liab lity Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV ADDRESS

The principal off ce and mailing address of this Limited Liability Company in the State of Florid is 3900 NW 79th AVENUE, SUITE 608, MIAMI, FL 33106. The Board of Managers may from the time move the principal office to another address in Florida.

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My commission expires:

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ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That SEDANOS PHARMACY MANAGEMENT, LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

ARTICLE VI MANAGEMENT

The Limited Liał ility Company is to be managed by one or more managers and is, therefore, a manager-managed company. The Initial Manager shall be ARMANDO J. GUERRA of 3900 NW 79th AVENUE, S. ITE 608, MIAMI, FL 33106.

WITNESS the rand and seal of State of Florida, this 29th day of	Carlos F. Arezo	
STATE OF FLORIDA	,	
STATE OF FLOOR) SS:	
COUNTY OF M AMI-DADE)	
	efore me. CARLOS F. ARAZOZA, and or is personally known to me, to be	
of member to the foregoing Art	ticles of SEDANOS PHARMACY N	MANAGEMENT, LLC., who
	acknowledges that he signed the sa	the for the purposes therein
expressed.	///	
WITNESS m / hand and seal	l at Miami-Dade County, Florida the	29th day of December, 2004.
Laura Koh		
Expires: May 16,	2008 NOTARY RATE, S AT LARGE	
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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That SEDANOS PHARMACY MANAGEMENT, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, has named ARAZOZA & FERNANDEZ-FRAGA, P.A, as its Agent, of 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134, to accept service of process within Florida.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Registered Agent

Carlos F. Arazoza Managing Director

Arazoza & Fernandez-Fraga, P.A.

Date: December 29, 2004

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SECRETARY OF STATE