

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L09000105099
FILED 8:00 AM
October 30, 2009
Sec. Of State
Isellers

Article I

The name of the Limited Liability Company is:
NORTHCLIFFE PHARMACY LLC

Article II

The street address of the principal office of the Limited Liability Company is:
13414 WHITEHAVE CT
SPRING HILL, FL. 34609

The mailing address of the Limited Liability Company is:
13414 WHITEHAVE CT
SPRING HILL, FL. 34609

Article III

The purpose for which this Limited Liability Company is organized is:
ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:
ANIL KUMAR AREMANDA
13414 WHITEHAVEN CT
SPRING HILL, FL. 34609

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.

Registered Agent Signature: ANIL KUMAR AREMANDA

Article V

The name and address of managing members/managers are:

Title: MGR
ANIL KUMAR AREMANDA
13414 WHITEHAVEN CT
SPRING HILL, FL. 34609

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Article VI

The effective date for this Limited Liability Company shall be:

11/02/2009

Signature of member or an authorized representative of a member

Signature: ANIL KUMAR AREMANDA