

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000103651

FILED
Oct 01, 2012
Secretary of State

Entity Name: PATIENT'S CHOICE PHARMACY, LLC

Current Principal Place of Business:

4801 S UNIVERSITY DR
SUITE 111
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

14126 SOUTH CYPRESS COVE CIRCLE
DAVIE, FL 33325

New Mailing Address:

4801 S UNIVERSITY DR
SUITE 111
DAVIE, FL 33328

FEI Number: 80-0649795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNSTEIN, JUSTIN D
14126 SOUTH CYPRESS COVE CIRCLE
DAVIE, FL 33325 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JUSTIN BROWNSTEIN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BROWNSTEIN, JUSTIN D
Address: 14126 SOUTH CYPRESS COVE CIRCLE
City-St-Zip: DAVIE, FL 33325

Title: MGR
Name: WATSON, DENNIS R
Address: 4444 HALLFAX DR
City-St-Zip: PORT ORANGE, FL 32127

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JUSTIN BROWNSTEIN

PRES

10/01/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date