Electronic Articles of Organization
For
Florida Limited Liability Company

L10000117907
FILED 8:00 AM
November 12, 2010
Sec. Of State
nculligan

Article I

The name of the Limited Liability Company is:

RHEUMATOLOGY PHARMACY SERVICES OF SOUTH FLORIDA, LLC

Article II

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

5130 LINTON BLVD.
SUITE F-1
DELRAY BEACH, FL. US 33484

The mailing address of the Limited Liability Company is:

5130 LINTON BLVD.
SUITE F-1
DELRAY BEACH, FL. US 33484

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:

PHILIPPE A SAXE M.D.
5130 LINTON BLVD.
SUITE F-1
DELRAY BEACH, FL. 33484

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: PHILIPPE A. SAXE, M.D.

Article V

The effective date for this Limited Liability Company shall be:

11/12/2010

Signature of member or an authorized representative of a member

Signature: JEFF COHEN