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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

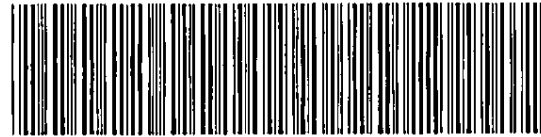
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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FEB 27 2020

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Specialty Care RX, LLC

Signature \_\_\_\_\_

Requested by: Seth

02/25/20

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
☒ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
☒ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION  
OF  
SPECIALTY CARE RX, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, for purposes of forming a limited liability company pursuant to Florida Statutes Section 605, hereby adopts the following Articles of Organization:

**ARTICLE I  
COMPANY NAME**

The name of the limited liability company is Specialty Care RX, LLC (the "Company").

**ARTICLE II  
INITIAL ADDRESS**

The initial street address and mailing address of the principal office of the Company is:

c/o 1 East Broward Boulevard, Suite 1800  
Fort Lauderdale, Florida 33301

**ARTICLE III  
REGISTERED AGENT**

The registered agent and the Florida street address of the registered agent is:

Adam M. Cohen, Esq.  
c/o Becker & Poliakoff, P.A.  
1 East Broward Boulevard, Suite 1800  
Fort Lauderdale, Florida 33301

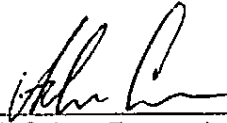
**ARTICLE IV  
MANAGEMENT**

The Company is to be managed by one (1) or more managers and is, therefore, a manager managed company.

The name and street address of the initial manager of the Company is:

Jeffrey Friedman  
c/o 1 East Broward Boulevard, Suite 1800  
Fort Lauderdale, Florida 33301

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 26th day of February, 2020.



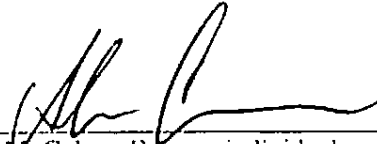
Adam M. Cohen, Esq., authorized representative

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ACCEPTANCE OF APPOINTMENT  
OF  
REGISTERED AGENT

The undersigned hereby accepts the appointment as registered agent of Specialty Care RX, LLC contained in the foregoing Articles of Organization and states that the undersigned is familiar with and accepts the obligations imposed upon registered agents pursuant to the Florida Revised Limited Liability Company Act.

Date: February 26, 2020.



Adam M. Cohen, Esq., an individual

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TALLAHASSEE, FL