

MAR-05-2002 TUE 04:28 PM EDWARDS & ANGELL

FAX NO. 561 833 7700

P. 03/04

Division of Corporations

MO20000000601

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000049992 9)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : EDWARDS & ANGELL
Account Number : 075410001517
Phone : (561) 833-7700
Fax Number : (561) 655-8719

FOREIGN LIMITED LIABILITY COMPANY

AMERICAN PHARMACEUTICAL TRADING COMPANY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

(((H02000049992 9)))

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. AMERICAN PHARMACEUTICAL TRADING COMPANY, LLC
(Name of foreign limited liability company)
2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 65-1150465
(FBI number, if applicable)
4. November 2, 2001
(Date of Organization)
5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON FILING
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 319 CLEMATIS STREET, SUITE 900
WEST PALM BEACH FL 33401
(Street address of principal office)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 MAR -5

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:

<u>USSC Health, LLC</u>	<u>International Medical Consultants, LLC</u>
<u>319 Clematis Street, Suite 900</u>	<u>319 Clematis Street, Suite 900</u>
<u>West Palm Beach, FL 33401</u>	<u>West Palm Beach, FL 33401</u>

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other State, country territory or nation.

WSH
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

William S. Hisey

Typed or printed name of signee

(((H02000049992 9)))

(((H02000049992 9)))

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

AMERICAN PHARMACEUTICAL TRADING COMPANY, LLC

2. The name and the Florida street address of the registered agent and office are:

ANGELL CORPORATE SERVICES, INC.

(Name)

c/o EDWARDS & ANGELL, LLP
ONE NORTH CLEMATIS STREET, SUITE 400

Florida street address (P.O. Box NOT ACCEPTABLE)

West Palm Beach FL 33401

(City/State/Zip)

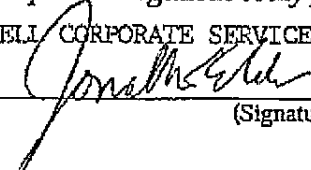
02 MAR -5

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 as provided for in Chapter 608, F.S.

ANGELL CORPORATE SERVICES, INC.

By:


(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

(((H02000049992 9)))

((H02000049992 9)))

Delaware

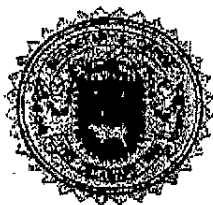
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMERICAN PHARMACEUTICAL TRADING COMPANY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
02 MAR -5



3453170 8300

020138047

((H02000049992 9)))

Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1639176

DATE: 02-28-02