#1/06000001033

	•	
(Re	questor's Name)	
(Ad	dress)	
. (Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400252251094

10/07/13--01026 -019 **25.00

13 0CT -7 PM 5: 35 SECRETARY OF STATE ALL AHASSEE ELORIDA

K. SALY EXAMINER

OCT -8 2013



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: October 3, 2013

Order#: 828414-010

Re: D & K HEALTHCARE RESOURCES LLC

Enclosed please find:

XX __ Change of Registered Agent and Office.

X Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris c/o Corporation Service Company

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	ARE DECOMBOED I LO	
1. Name of the limited liability company: D&K HEALTHO	ARE RESOURCES LLC	
2. (a) Principal office address of limited liability company	: One Post Street	
(Note: MUST BE STREET ADDRESS)	San Francisco, CA 94104	
		
(h) Mailian address of limited lightlites commons		E 8
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
MAT BE FOST OFFICE BOX		
		OF PO
2/20/2006	M06000001033	등의 주
	4. Document number	
5. Date of filling/registration in Florida	4. Document number	9:14 33
5. (a) Registered Agent and Registered Office shown on a	he records of the Florida Dep	t. of State:
Registered Agent:	The Prentice-Hall Corporation	System, Inc.
D 1 1007 111	4004.11	
Registered Office Address:	1201 Hays Street Tallahassee, FL 32301	
	Talialiassee, FL 32301	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>		:
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address:	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)		
	Tallahassee	_,FL <u>32301</u>
If the limited liability company is not organized under the longitude that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the regical. Or, in the case of a Flori was/were authorized by an af	istered office da limited firmative vote of
Dona Priebe, Authorized Person	_	
Printed or typed name of signee		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of and I am familiar with and accept the obligations of my portain that the limited liability company and the limited liability company. By: June Output	gree to act in this capacity. I oper and complete performant sition as registered agent as p rely reflect a change in the re y has been notified in writing	further agree to ce of my duties, provided for in gistered office of this change.
All Marian		

Signature of Registered Agent Corporation Service Company Sylvia Queppet, Asst VP