

M12000000051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

**A. LUNT**

JAN 30 2011

**EXAMINER**

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TALLAHASSEE, FLORIDA

2012 JAN 27 PM 3:19

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1305 Corporate Center Dr  
Eagan, MN 55121

www.primetherapeutics.com

FILED  
2012 JAN 27 PM 3:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

January 19, 2012

Via UPS 2-Day Delivery

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**RE: Prime Therapeutics Specialty Pharmacy LLC – Document # M1200000051  
Corrective Filing – Change in Managers**

Dear Florida Division of Corporations:

Enclosed are the following documents to correct a previous error regarding members with our initial filing:

- Articles of Correction for a Foreign LLC
- Check in the amount of \$25.00 for the filing fee

You may contact me as listed below should you have any questions or require additional information.

Stacy Schulze, Regulatory Specialist  
Prime Therapeutics LLC  
1305 Corporate Center Drive  
Eagan, MN 55121  
612-777-5697  
FAX: 866-470-8807  
sschulze@primetherapeutics.com

Thank you for your assistance.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stacy Schulze".

Stacy Schulze  
Regulatory Specialist  
Enclosures

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Prime Therapeutics Specialty Pharmacy LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stacy Schulze, Regulatory Specialist

Name of Person

Prime Therapeutics LLC

Firm/Company

1305 Corporate Center Drive

Address

Eagan, MN 55121

City/State and Zip Code

ssschulze@primetherapeutics.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stacy Schulze

Name of Person

at ( 612 )

777-5697

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee    ☐ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

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**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

**FIRST:**      The name of the limited liability company is:  
Prime Therapeutics Specialty Pharmacy LLC

**SECOND:**    The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The previous filing contained incorrect Managers. The following Managers need

to be removed: Andrew C. Corbin, Eric S. Elliott, Charles T. Roehrick, Aaron

M. Rodriguez, Matthew S. Yordy, Cameron J. Olig. The following Managers need

to be added: Duane Barnes, Leah Bailey, Richard Warren, Kristin Taylor-Geisler

**OR**



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: January 18, 2012

Leah Bailey

Signature of a member or authorized representative of a member

Leah Bailey, Manager (Secretary)

Typed or printed name of signee

**Filing Fee:            \$25.00**

**Certified Copy:     \$30.00 (optional)**

**FILED**  
2012 JAN 27 AM 9:19  
CLERK OF CIRCUIT COURT  
HALL COUNTY, FLORIDA