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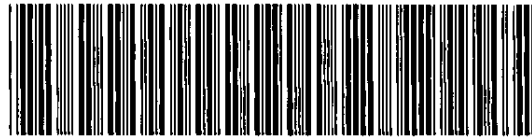
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EXAMINER



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RECEIVED
12 MAR -7 PM 1:48
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 122168 7509407
AUTHORIZATION : *Stephanie Milnes*
COST LIMIT : \$ 130.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR - 7 AM 10:49

ORDER DATE : March 7, 2012
ORDER TIME : 12:57 PM
ORDER NO. : 122168-005
CUSTOMER NO: 7509407

FOREIGN FILINGS

NAME: WALGREENS SLEEP AND
RESPIRATORY SERVICES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Walgreens Sleep and Respiratory Services, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Michelle Mazzenga

Name of Person

Walgreens Sleep and Respiratory Services, LLC

Firm/Company

PO Box 377

Address

Deerfield, IL 60015

City/State and Zip Code

michelle.mazzenga@walgreens.com

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

For further information concerning this matter, please call:

Michelle Mazzenga

Name of Person

at (847) 527-4672

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAR -7 AM 10:49

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. Walgreens Sleep and Respiratory Services, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 36-3259064

(FEI number, if applicable)

4. 6/24/08

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6.

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 300 Wilmot Rd. MS 3301

Deerfield, IL 60015

(Street Address of Principal Office)

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:

please see attached

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: home medical equipment and oxygen

Michael Felish

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael Felish

Typed or printed name of signee

**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:

Walgreens Sleep and Respiratory Services, LLC

If unavailable, the alternate to be used in the state of Florida is:

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

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL

32301

City/State/Zip

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, Florida Statutes.

Judith Easton

(Signature)

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

WALGREENS SLEEP AND RESPIRATORY SERVICES, LLC

Officers:

Title	Name and Personal Data	Business Address
President and Director 02/04/02	Paul Mastrapa	485 Half Day Road Suite 300 Buffalo Grove, IL 60089-8806 (800) 879-6137
Secretary and Director 3/15/10	Robert Silverman	104 Wilmot Road MS 1420 Deerfield, IL 60015-5121 (847) 315-4574
Vice President, Asst. Secretary, & Director 05/20/07	Lori Zsitek	485 Half Day Road Suite 300 Buffalo Grove, IL 60089-8806 (800) 879-6137
Vice President 5/1/09	John Mann	302 Wilmot Rd. MS 3301 Deerfield, IL 60015-5121 (847) 527-4640
Vice President 3/15/10	Richard Steiner	104 Wilmot Road MS 1420 Deerfield, IL 60015-5121 (847) 315-4543
Treasurer 5/1/09	Michael Felish	302 Wilmot Road MS 3301 Deerfield, IL 60015-5121 (847) 527-4824

Parent Companies:

Walgreens Sleep and Respiratory Services, LLC, a Delaware limited liability company, is a single member LLC whose sole member is Option Care Enterprises, Inc. ("OCE"). OCE, a Delaware corporation, is a wholly owned subsidiary of Walgreens Infusion Services, Inc. ("WIS"), a Delaware corporation. WIS is a wholly owned subsidiary of Walgreen Co. ("WAG"). WAG is publicly traded on the NYSE and NASDAQ. Currently no individual or corporation owns 10% or more of WAG.

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:57 PM 11/02/2011
FILED 04:47 PM 11/02/2011
SRV 111160806 - 4566147 FILE

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: Dependicare Home Health, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows: effective January 1, 2012, Dependicare Home Health, LLC shall change its name to Walgreens Sleep and Respiratory Services, LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 2nd day of November, A.D. 2011.

By: Robin E. Van Cleave
Authorized Person(s)

Name: Robin E. Van Cleave
Print or Type

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WALGREENS SLEEP AND RESPIRATORY SERVICES, 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 SEVENTH DAY OF MARCH, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WALGREENS SLEEP AND RESPIRATORY SERVICES, LLC" WAS FORMED ON THE FIRST DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4566147 8300

120283398

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9413865

DATE: 03-07-12