### Florida Department of State

Division of Corporations 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.

(((H140001130243)))



H140001130243ABCQ

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)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address	:

IN MAY 12 AM 8: 29 ECRETARY OF STATE ALLAHASSEE, FLORIDA

CHAY 12 PH 4:3

SECHETARY OF STATE FALLAHASSEE, FLORIDA

### Foreign Limited Liability Company Citizen's RX LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

5/12/2014

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Citizen's Rx, 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:

Randy Delkus		
Name of Person		
Citizen's Rx, LLC		
Pirm/Company		
1144 Lake Street, Suite 404		
Address		
Oak Park, IL 60301		
City/State and Zip Code		
ddevening@citizensrx.com		
E-mail address: (to be used for future annual report notification)		

For further information concerning this matter, please call:

Randy Delkus

**"**(888

545-1120

Name of Contact Person

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 Pcc, Certificate of Status & Certified Copy

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

FOREIGN LIMITED LIABILITY COMPANY TO TRANSAC	STATUTES, THE FULLOWING IS SUBMITTED TO REGISTER A TBUSINESS IN THE STATE OF FLORIDA:
1 Citizen's Rx LLC	
•• — — —	lude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of Liability Company," "L.L.C," or "LLC,")	transacting business in Florida. The alternate name must include "Limited
<sub>2</sub> Tennessee	27-2485135
(Jurisdiction under the law of which foreign limited liability sompany is organized)	(FEI number, if applicable)
4 5/1/2014	
	n Fiorida, if prior to registration.)  1, F.S. to determine penalty liability)
, 1144 Lake Street, Suite 404, Oa	
S. The Land Career, Come for you	- <del>1</del>
	ss of Principal Office)
6. 1144 Lake Street, Suite 404, Oal	
6. THE Lake Street, Suite 404, Oal	RT AIR IL OOO
(Mail	ling Address)
7. The name, title or capacity and address of the per	rson(s) who has/have authority to manage is/are:
Managers: John Burns, Jon Lichte	erman, Randy Delkus, Jeff Cooper
Address: 1144 Lake Street Suite 4	104, Oak Park IL 60301
<ol><li>Attached is an original certificate of existence, no having custody of records in the jurisdiction under th</li></ol>	more than 90 days old, duly authenticated by the official
	a translation of the certificate under eath of the translator
must be submitted)	
Startife	3 DAG
	an authorized person estimate an affirmation under the penalties of perjury that the facts stated herein are true. I
Randy Delkus	н оцимо ооснива е име осрестивну ва ретиво да из ва (1134, г.а.)
	ed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: Critzen's Rx LLC		
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida st	treet address of the registered agent and office are:	
C T Co	rporation System	
	(Name)	
1200 Sc	outh Pine Island Road	
Fl	orida Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation,	733324	
	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 605, Florida Statutes.

(Signature)

Katherine Lackey, Assistant Secretary

\$ 100.00 Flling Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



STATE OF TENNESSEE Tre Hargett, Secretary of State **Division of Business Services** William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

**CT CORPORATION** 

2390 E CAMELBACK ROAD PHOENIX, AZ 85016

May 12, 2014

Request Type: Certificate of Existence/Authorization Request #: 0128004

Issuance Date: 05/12/2014

Copies Requested:

**Document Receipt** 

Receipt #: 1502397

Filing Fee:

\$22,25

Payment-Credit Card - State Payment Center - CC #: 156191214

\$22,25

Regarding:

**CITIZEN'S RX LLC** 

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 05/05/2010

Status:

Active

Duration Term:

Perpetual

Control #:

630414

Date Formed:

05/05/2010

Formation Locale: TENNESSEE

Inactive Date:

**Business County:** 

### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

#### CITIZEN'S RX LLC

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 007183326