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COVER LETTER

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TO:	Registration Section Division of Corporations		
SUBJE	Janus Rx, LLC		
	Nar	ne of Limited Liability Company	
The end Existen	closed "Application by Foreign Limited Liability ace, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida	
Please	return all correspondence concerning this matter	to the following:	
	Jennifer J. McCartha		
	Name of Person		
	The McCartha Law Firm, LLC		
	Firm/Company		
	100 Jefferson Street S. Suite 200		
	Address		
	Huntsville, AL 35801		
	City/State and Zip Code		
	jennifer@mccarthalaw.com		
	E-mail address: (to b	ne used for future annual report notification)	
For fur	ther information concerning this matter, please c	all:	
Jennifer J. McCartha		256 270-4233 at ()	
	Name of Contact Person	Area Code Daytime Telephone Number	
Mailing Address:		Street Address:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	
		Tallahassee, FL 32303	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE	D 4 DTM ΕΝΤ ΛΕ «Τ 4 ΤΡ	
	□ \$125.00 Filing Fee □ \$130.00 Filing F		
	Certificate		

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Janus Rx, 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. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C," or "L.L.C," 81-3774031 Alabama (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Janus Rx, LLC Janus Rx, LLC (Mailing Address) (Street Address of Principal Office) 3480 Eastern Blvd 3480 Eastern Blvd Montgomery, AL 36116 Montgomery, AL 36116 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 121 Hays Street Office Address: Tallahassec 32301 Florida (Cny)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Haley N. Diven, Asst. VP

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Krystal Mims Name: ____ □Manager ☐ Manager 3480 Eastern Blvd Address: 3480 Eastern Blvd Address: **■**Member □Member Montgomery, AL 36116 Montgomery, AL 36116 □ Authorized **Authorized** Person Person □ Other □Other_____ □Other Other___ January Green Name: □ Manager Name: □Manager Address: 3480 Eastern Blvd Address: ____ □ Member ☐ Member Montgomery, AL 36116 Authorized Authorized Person Person Other □Other Other____ Other □Manager Name: □ Manager Address: □Member Address: □Member ☐ Authorized ☐ Authorized Person Person □Other □Other_____ □Other □Other____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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. Kuntal Mine Signature of an authorized person Krystal Mims, President Typed or printed name of signed

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Janus Rx, LLC was formed in Madison County, Alabama on September 7, 2016. The Alabama Entity Identification number for this entity is 371-639. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Scal of the State, at the Capitol, in the city of Montgomery, on this day.

09/28/2021

Date

X 24. Menill

John H. Merrill

Secretary of State