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ALCHETARY OF STATE

TALLANASSEE, FLORIDA

TRANSMITTAL LETTER

SUBJECT: Lynnf	ield Compounding Center Inc.
·	(Name of corporation)
DOCUMENT NUMBER:	P01000000223
The enclosed Statement of Cha	ange of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence	ce concerning this matter to the following:
Rebecca Shanahan	<i>Q</i> 3
(Name o	f person)
PrioritydHealthcare	Corporation
(Name of fire	n/company)
250 Technology Park #	f person) Corporation n/company) 124 ress)
(Add	ress)
Lake Mary, FL. 32746	
(City/state an	d zip code)
For further information concern	ning this matter, please call:
Sherry Markey (Name of person	at (407) 804-6734 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made	de payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: Lynnfield Compounding Center, Inc.
2. The principal office address: 12 Kent Way #120 C
Byfield, Ma. 01922
3. The mailing address (if different): 250 Technology Park # 124
Lake Mary, FL. 32746
4. Date of incorporation/qualification: 12/29/00 Document number: P01000000223
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Barbara Luttrell
250 Technology Park # 124
Lake Mry, FL. 32746
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Rebecca Shanahan
250 Technology Park # 124
(P.O. Box or personal mailbox NOT acceptable) Lake Mry, FL. 32746
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.
Steve Cosler, President, CEO &DIrector (Signature of an officer, chairman of vice chairman of the board) (Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title)
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 duites, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Rebecca Shawahaw Securitary (Typed or Printed Name) (Capacity)

* * * FILING FEE: \$35.00 * * *