

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000027917

Entity Name: INTEGRITY PHARMACY SERVICES, LLC

Current Principal Place of Business:

1901 CAMPUS PLACE
LOUISVILLE, KY 40299

Current Mailing Address:

1901 CAMPUS PLACE
TAX DEPARTMENT
LOUISVILLE, KY 40299 US

FEI Number: 20-0988322

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name WEISHAR, GREGORY
Address 1901 CAMPUS PLACE
City-State-Zip: LOUISVILLE KY 40299

Title MGRM
Name CANERIS, THOMAS A
Address 1901 CAMPUS PLACE
City-State-Zip: LOUISVILLE KY 40299

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THOMAS A. CANERIS

MANAGER

04/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date