2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 27, 2013
Secretary of State
CC6482309260

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Entity Name: PHARMACY BENEFIT SOLUTIONS, LLC

Current Principal Place of Business:

2240 BELLEAIR ROAD
SUITE 250
CLEARWATER, FL 33764

Current Mailing Address:

2240 BELLEAIR ROAD
SUITE 250
CLEARWATER, FL 33764 US

FEI Number: 27-1786842

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUNDRA, VINANTA
2240 BELLEAIR ROAD
SUITE 250
CLEARWATER, FL 33764 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	MGR
Name	VINANTA, MUNDRA
Address	2240 BELLEAIR ROAD SUITE 250
City-State-Zip:	CLEARWATER FL 33764

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VINANTA MUNDRA MGR 03/27/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date