2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Aug 15, 2015
Secretary of State
CR0597460049

DOCUMENT# L13000163554

Entity Name: QUALITAS HOME INFUSION PHARMACY, LLC

Current Principal Place of Business:

1688 MERIDIAN AVE., STE. 900
MIAMI BEACH, FL 33139

Current Mailing Address:

1688 MERIDIAN AVE., STE. 900
MIAMI BEACH, FL 33139

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FILLER, DAVID F ESQ.
1688 MERIDIAN AVE., STE. 900
MIAMI BEACH, FL 33139 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: DAVID F FILLER 08/15/2015

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	VALVERDE, RENE J
Address	460 LEUCADENDRA DR
City-State-Zip:	CORAL GABLES FL 33156

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: RENE J VALVERDE MANAGER 08/15/2015

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