2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2014
Secretary of State
CC6640513177

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Entity Name: QOL MEDS, LLC

Current Principal Place of Business:

4900 PERRY HWY
BUILD 2
PITTSBURG, PA 15229

Current Mailing Address:

4900 PERRY HWY
BUILD 2
PITTSBURG, PA 15229

FEI Number: 27-0556097

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR. SUITE A
TALLAHASSEE, FL 32301 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	Title	MGR
Name	SPECIALIZED PHARACEUTICALS INC	Name	BOWMAN INVESTMENTS, LLC
Address	4900 PERRY HWY	Address	20332 CHRISTOFLE DR
City-State-Zip:	PITTSBURG PA 15229	City-State-Zip:	CORNELIUS NC 28031
Title	PRES	Title	CFO
Name	SMITH, JAMES F	Name	RIZZO, RICHARD
Address	812 ANGELICA CIR	Address	410 MEADOWLARK LANE
City-State-Zip:	RALEIGH NC 27518	City-State-Zip:	GIBSONIA PA 15044
Title	MGR	Title	MGR
Name	SASSANO, DANIEL	Name	MOMAHAN, MICHAEL K
Address	704 SOUTH SUTHERLAND AVE	Address	2502 GLENEAGLES DR
City-State-Zip:	MONROE NC 28112	City-State-Zip:	GASTONIA NC 28056

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: LISA THEWES CONTROLLER 01/09/2014

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