

2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000000343

Entity Name: PHARMACY ACQUISITION CO., LLC

Current Principal Place of Business:

1286 SE HOLGATE BLVD
SUITE C-2
PORTLAND, OR 97202

Current Mailing Address:

1286 SE HOLGATE BLVD
SUITE C-2
PORTLAND, OR 97202 US

FEI Number: 82-1786291

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MANAGER
Name ORM PHARMACY LLC
Address 1286 SE HOLGATE BLVD
SUITE C-2
City-State-Zip: PORTLAND OR 97202

Title MANAGER
Name PINNACLE FERTILITY INC
Address 1286 SE HOLGATE BLVD
SUITE C-2
City-State-Zip: PORTLAND OR 97202

Title MANAGER
Name TREHARNE, TYLER
Address 1286 SE HOLGATE BLVD
SUITE C-2
City-State-Zip: PORTLAND OR 97202

Title MANAGER
Name LPSMFP HOLDINGS, LLC
Address 1286 SE HOLGATE BLVD
SUITE C-2
City-State-Zip: PORTLAND OR 97202

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: TYLER TREHARNE

MANAGER

03/10/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date