

No. W 115809		Due no later than Jul 31, 2014 Annual Report Form		2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. PHARMACY ENROLLMENT SERVICES, LLC TERRY DUNCAN 2650 MCCORMICK DR SUITE 200S CLEARWATER FL 33759		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705 USA			
NO FILING FEE IF RECEIVED BY DUE DATE				3. <u>New</u> Registered Agent Signature:*			
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name AL MARKETING LLC	Street or PO Address 2650 MCCORMICK DR STE 200S		City CLEARWATER	State FL	Country USA	Postal Code 33759
5. Organized Under the Laws of: DE W 115809		6. Annual Report must be signed.* Signature: Timothy North Name (type or print): Timothy North Date: 05/12/2014 Title: Mgr Al Marketing Llc					
Processed 05/12/2014 * Electronically provided signatures are accepted as original signatures.							