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|--|-----------------------|---|------------|--|---------|-------------|--|
| No. W 103681 | | Due no later than May 31, 2016 | | 2. Registered Agent and Address (NO PO BOX) | | | |
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE | | 1. Mailing Address: Correct in this box if needed. PHARMERICA DRUG SYSTEMS, LLC TAX DEPARMENT 1901 CAMPUS PL LOUISVILLE KY 40299 | | CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 | | | |
| | | | | 3. <u>New</u> Registered Agent Signature:* | | | |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager. | | | | | | | |
| Office Held | Name | Street or PO Address | City | State | Country | Postal Code | |
| MANAGER | GREGORY S. WEISHAR | 1901 CAMPUS PLACE | LOUISVILLE | KY | USA | 40299-2308 | |
| MANAGER | THOMAS A. CANERIS | 1901 CAMPUS PLACE | LOUISVILLE | KY | USA | 40299-2308 | |
| MANAGER | DAVID W. FROESEL, JR. | 1901 CAMPUS PLACE | LOUISVILLE | KY | USA | 40299-2308 | |
| 5. Organized Under the Laws of: DE W 103681 | | 6. Annual Report must be signed.* Signature: David W. Froesel, Jr. Name (type or print): David W. Froesel, Jr. | | | | | |
| Date: 05/17/2016 Title: Manager | | | | | | | |
| Processed 05/17/2016 | | * Electronically provided signatures are accepted as original signatures. | | | | | |