

No. <b>W 100319</b>		<b>Due no later than Feb 29, 2012</b>		2. Registered Agent and Address <b>(NO PO BOX)</b>			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  CYNTRIST PHARMACY, LLC 541 S ORLANDO AVE., STE 204 MAITLAND FL 32751		INCORP SERVICES, INC. 921 S ORCHARD ST STE G BOISE ID 83705 USA			
				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	STEPHEN WELLS	541 S ORLANDO AVE., STE 204	MAITLAND	FL	USA	32751	
MANAGER	JEFFREY FELDBERG	541 S ORLANDO AVE., STE 204	MAITLAND	FL	USA	32751	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
<b>FL W 100319</b>		Signature: Jeffrey Feldberg				Date: 01/13/2012	
		Name (type or print): Jeffrey Feldberg				Title: Manager	
Processed 01/13/2012		* Electronically provided signatures are accepted as original signatures.					