

No. W 113296		Due no later than Apr 30, 2013		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. CATAMARAN RX CHSS, LLC 2441 WARRENVILLE ROAD SUITE 610 LISLE IL 60532		C T CORPORATION SYSTEM 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	
MEMBER	CATAMARAN HEALTH SOLUTIONS, LLC	2441 WARRENVILLE ROAD SUITE 610	LISLE	IL	USA	60532	
5. Organized Under the Laws of: DE W 113296		6. Annual Report must be signed.* Signature: Dareth Jeffers Name (type or print): Dareth Jeffers Date: 03/27/2013 Title: Poa					
Processed 03/27/2013		* Electronically provided signatures are accepted as original signatures.					