State of Idaho

Office of the Secretary of State

AMENDED CERTIFICATE OF AUTHORITY

OF/

WALGREENS LONG-TERM CARE PHARMACY, LLC

File Number W 42821

I, BEN YSURSA, Secretary of the State, hereby certify that an Application for Amended Certificate of Authority, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Amended Certificate of Authority to reflect the name change from WALGREENS LONG-TERM CARE PHARMACY, LLC to MEDICATION ADHERENCE SOLUTIONS, LLC and attach hereto a duplicate of the application for such amended certificate.

Dated: January 23, 2012



Ben youra

By mtria/m



APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY OF FOREIGN LIMITED LIABILITY COMPANY

3 AM 10: 08

FILED EFFECTIVE

(Instructions on back of application)

SECRE MRY OF STATE STATE OF IDAHO

The name of the foreign limited liability company prior to this amendment is: Walgreens Long-Term Care Pharmacy, LLC			
	reign limited liability company was required in Idaho, the name the foreign limited liabili	•	
The date the original application for certificate of authority was filed in Idaho: 09/16/2005			
 The application for certificate of authority for foreign limited liability company is amended as follows: (check one or more) 			
⊉ a.	The name of the limited liability company has been changed to: Medication Adherence Solutions, LLC		
	If the new name is not available or permissible in Idaho, the name to be used in Idaho is:		
□ b.	The LLC has changed its jurisdiction of registration, without a change of formation to:		
□ c.	Other amendment:		
5. Signature of a manager, member or authorized person: Secretary of State use only			
Signature Typed Name	e John Mann	groopMorms\unand rag_fore\gn lc.p8 RevisedOg/2010	
Capacity _	Vice President	g:corpyforms\an	IDAHO SECRETARY OF STATE 01/23/2012 05:00

@1/23/2012 05:00 CK: 11212640 CT: 97385 BH: 1307294 1 0 30.00 = 30.00 FOR LLC AM # 3

W42821



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 18TH day of JANUARY A.D. 2012

Authentication #: 1201801029 Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE