

LICENSE NO. A4-0002511

STATE OF DELAWARE

DIVISION OF PROFESSIONAL REGULATION

NOT TRANSFERABLE

861 Silver Lake Blvd.
Cannon Building, Suite 203
Dover, DE 19904-2467

PROFESSION: Pharmacy - Wholesale Drug Distributor

EXPIRATION DATE: 09/30/2020

ISSUED TO: Woodfield Distribution, LLC

MAILING ADDRESS

Woodfield Distribution, LLC
951 Clint Moore Road
Suite A
Boca Raton FL 33487



PROFESSIONAL LICENSE

THIS CERTIFICATE THAT THE BESSON, NAMED HEREIN, IS HEREBY LICENSED TO
CONDUCT BUSINESS AND ENGAGE IN THE PROFESSION AND CARE ABOVE IS
DOCUMENT IS DULY ISSUED UNDER THE LAWS OF THE STATE OF DELAWARE.

[Handwritten Signature]

LICENSEE SIGNATURE

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