Original License

CALIFORNIA STATE BOARD OF PHARMACY 2720 GATEWAY OAKS DRIVE, SUITE 100 SACRAMENTO, CA 95833 (916) 518-3100

Designated Representative-Reverse

LICENSE NUMBER RECEIPT NO.

00743962

Distributor License VALID UNTIL JULY 01, 2024

JOHN A. CAPELLI 37103 65TH CT **BURLINGTON WI 53105**

)7/31/23)7/31/23

The official status of this license can be verified at www.pharmacy.ca.gov

In accordance with the provisions of section 4053.2 of the Business and Professions Code, the individual named hereon holds a Designated Representative-Reverse Distributor License.

Any change of name or address must be reported to the Board of Pharmacy in writing within 30 days of the change.

SIGNATURE OF REPRESENTATIVE-REVERSE DISTRIBUTOR:

FORM OPHDRR (09/30/19