

**REMINDERS: (Please read important information)**

- \* You need to keep the Board apprised of the current mailing address, by submitting a written or faxed request for a change of address. Please include facility name and license number.
- \* Please pay attention to the expiration date of your license. If you do not receive a renewal notice, at least four (4) weeks prior to 12/31/2023, contact the Board Office and request that a renewal form be mailed to you.
- \* You may also download a generic application on line through our website <http://www.rld.state.nm.us/boards/> once there click on Individuals Boards and Commissions then click on Pharmacy then click on forms and applications.
- \* A change of name requires that you submit a written request along with a \$10.00 fee, and copy of the legal document supporting the name change, also the request must specify if there was a change of ownership.

**THIS IS TO CERTIFY THAT**  
**Direct Customer Solutions, LLC**

is licensed by the New Mexico Board of Pharmacy  
in accordance with provisions of laws in the State of New Mexico

License Number <b>WD00013151</b>	License / Type <b>Distributor</b>
Expiration Date <b>12/31/2023</b>	
<b>Original Issue Date: 07/21/2022</b>	

The bearer is prohibited by law from using this identification card to give the impression that they are in any way connected with a governmental agency

License is hereby granted to operate a **Wholesaler Distributor** in accordance with provisions under chapter 61-11-14 NMSA 1978 Comp., Laws of New Mexico at the address and for the period shown hereon.



License Number: **WD00013151**

Original Issue Date: **07/21/2022**  
Expiration Date: **12/31/2023**

***Direct Customer Solutions, LLC***

**4277 Hwy 412 S  
Bells, TN 38006**

Chris Woodul, **CHAIRMAN**

**NON-TRANSFERABLE**