15000119353

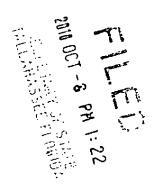
| (Requestor's Name) |
|-----------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| | stration Secti sion of Corpo | | | • | |
|-----------------------------------------|---------------------------------|-------------------------------------------------|---------------------------------------------------------------------------|-------------------------|----------------|
| SUBJECT: | Benzer FL 11 | 1.I.C | | | |
| .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | Name of Lim | ited Liability Company | | |
| | | nendment and fee(s) are sub | - | | |
| ricase return : | air correspond | ence concerning this matter Frank Pomarico | to the following. | | |
| | | · | Name of Person | · · | |
| | | Benzer Pharmacy | | | |
| | | | Firm/Company | | |
| | | 5908 Breckenridge Parkwa | ıy | | |
| | | | Address | | 20 |
| | | Tampa, Fl. 33610 | | | 2ala oct |
| | | fpomarico@benzerpharmac | | | 7.27 |
| | • | | to be used for future annual report | t notification) | PH 1: 22 |
| For further inf | formation con- | erning this matter, please co | all: | | |
| Frank Pomari | ico | | | 21 ext. 113 | |
| | Name of Po | erson | Area Code Da | iytime Telephone Number | |
| Enclosed is a | check for the f | ollowing amount: | | | |
| ■ \$25.00 Fil | ling Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | te of Status & |
| | | | | | |

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, F1, 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Benzer FL 11 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on <u>07/10/2015</u> _____ and assigned Florida document number <u>L15000119353</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 2653 BRUCE B HOWNS Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address . Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-----------------------------|------------------------|----------------|
| MGRM | Benzer Pharmacy Holding LLC | 5908 Breckenridge Pkwy | n vu |
| | | Tampa, FL 33610 | Add |
| | | | Remove |
| | | | Change |
| MGR | Alpesh Patel | 5908 Breckenridge Pkwy | = Add |
| | | Tampa. FL 33610 | |
| | | | Remove |
| | | | Change |
| MGR | Manish Patel | 5908 Breckenridge Pkwy | = Add |
| | | Tampa, FL 33610 | Remove |
| | | | 22 |
| AMBR | Benzer Pharmacy Holding LLC | 5908 Breckenridge Pkwy | Change |
| | | Tampa, FL 33610 | P P |
| | | | D-Remeye 22 |
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| ective date, if other the effective date is listed, the te: If the date inserted is tument's effective date of the effective date of | n this block does no | t meet the applic | able statutory fi | r more than 90 days ling requirements | optional) after tiling.) Pursua , this date will no | int to 605.020° of be listed as |
| record specifies a c he 90th day after t | | | ot an effectiv | e time, at 12:(|)1 a.m. on th | e earlier o |
| September 18 | _ | 2018 | | | | |
| | 00 | -, | \supset | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00