

N08000003082

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10 OCT 15 PM 2: 82

Amend/Name  
chg  
@ 10/16/12

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Good Samaritan Pharmacy & Health Services, Inc.

DOCUMENT NUMBER: N08000003082

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kimberly Chmielewski

(Name of Contact Person)

Good Samaritan Pharmacy & Health Services, Inc.

(Firm/ Company)

2502 N Tamiami Trail

(Address)

Nokomis, FL 34275

(City/ State and Zip Code)

kchmielewski@cpsarasota.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Chmielewski

(Name of Contact Person)

at ( 941 ) 822-1490

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|---|--|---|--|

**Mailing Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

The Community Pharmacy of Sarasota County, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N08000003082

(Document Number of Corporation (if known))

RECEIVED  
SECRETARY OF STATE  
CORPORATION DIVISION  
12 OCT 15 PM 2:02

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Good Samaritan Pharmacy & Health Services, Inc.

*The new*

*name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

2502 N Tamiami Trail

*(Principal office address **MUST BE A STREET ADDRESS**)*

Nokomis, FL 34275

**C. Enter new mailing address, if applicable:**

2502 N Tamiami Trail

*(Mailing address **MAY BE A POST OFFICE BOX**)*

Nokomis, FL 34275

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent:* \_\_\_\_\_

\_\_\_\_\_  
*(Florida street address)*

*New Registered Office Address:*

\_\_\_\_\_  
*(City)*

\_\_\_\_\_, Florida

\_\_\_\_\_  
*(Zip Code)*

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

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, if changing*



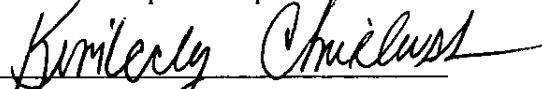
**ARTICLES OF AMENDMENT TO  
ARTICLES OF INCORPORATION OF  
THE COMMUNITY PHARMACY OF SARASOTA COUNTY, INC.**

The Article of Incorporation of The Community Pharmacy of Sarasota County, Inc. which were filed on March 28, 2008 (Document Number N08000003082), were amended by a unanimous vote of its directors as follows:

- A. By deleting Article I, Paragraph 1, in its entirety and by substituting in its place the following:
  - 1. The name of the Corporation is: GOOD SAMARITAN PHARMACY & HEALTH CARE SERVICES, INC.
  
- B. All other references within the Articles of Incorporation to The Community Pharmacy of Sarasota County, Inc. shall be replaced with GOOD SAMARITAN PHARMACY & HEALTH CARE SERVICES, INC.

Dated this 9<sup>th</sup> day of October, 2012

The Community Pharmacy of Sarasota County, Inc,  
a Florida non-for-profit corporation

By:   
Kimberly Chmielowski, Registered Agent

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

**ARTICLE II:**

The principal office of this Corporation is: 2502 N Tamiami Trail, Nokomis, FL 34275.

The mailing address of this Corporation is: 2502 N Tamiami Trail, Nokomis, FL 34275.

**ARTICLE V:**

B. Without limiting the generality of the foregoing, to offer prescription assistance, prescription advocacy services and health care services to needy residents in the community.

**ARTICLE VII:**

The powers of the Corporation shall be exercised, its properties controlled, and its affairs conducted by a Board of Directors. The Board of Directors of the Corporation shall be five (5) persons, but not less than three (3) persons, provided, however, that such number may be increased by an amendment to the Bylaws for such purpose duly adopted by the Board of Directors.

The date of each amendment(s) adoption: 10/11/2012

Effective date if applicable: 10/10/2012

(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated October 11, 2012

Signature Kimberly Chmielewski

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Kimberly Chmielewski  
(Typed or printed name of person signing)

Chairman/Registered Agent  
(Title of person signing)