

P94 000 051792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

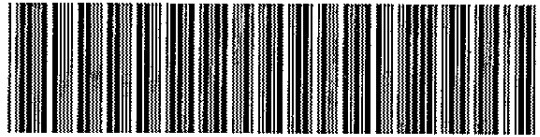
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Michael Carbone GAVE
 AUTHORIZATION BY PHONE TO
 CONNECT Corporate Name / state
 DATE 09/11/06 # 607,1006
 BY EXAM. D Connell

Office Use Only



600079312846

09/05/06 11:32:00 **85.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 SEP -5 PM 3:55

Name Change

09/11/06

DC

FILED
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
06 SEP -5 PM 3:55

**ARTICLES OF AMENDMENT TO
THE ARTICLES OF INCORPORATION OF
C AND P LEWIS PHARMACY, INC.**

Pursuant to Florida Statutes Section 607.1006, the Articles of Incorporation of C AND P LEWIS PHARMACY, INC. are hereby amended pursuant to a written consent in lieu of a meeting executed by the holders of all the Corporation's common stock and all the Corporation's Directors on the 31st day of August, 2006, as follows:

ITEM I

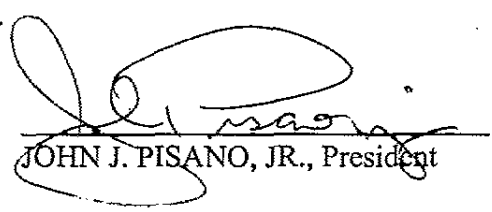
- 1. Name. ARTICLE I is hereby amended to read as follows:

**ARTICLE I
NAME**

The name of the corporation is 12345 Inc.

These Articles of Amendment to the Articles of Incorporation were adopted by the Shareholders with the number of votes cast by such Shareholder being sufficient for approval, and Directors by consent resolution on the 31st day of August, 2006.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Amendment to the Articles of Incorporation this 31st day of August, 2006.



JOHN J. PISANO, JR., President


ATTEST:

MICHAEL CARBONE, Secretary

STATE OF FLORIDA)
)ss
COUNTY OF PALM BEACH)

The foregoing instrument was sworn to and acknowledged before me this 31st day of August, 2006, by JOHN J. PISANO, JR., President of C AND P LEWIS PHARMACY, INC., a Florida corporation, on behalf of the Corporation.

 J Daniel Breda
My Commission DDS48123
Expires November 01, 2008


Notary Public
My Commission Expires: