463183

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
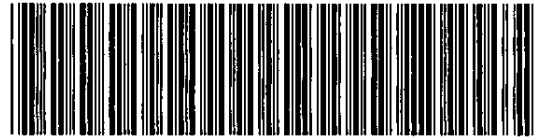(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

12/21/12

Michael Pass

Passcare Corp

5472 America Dr

Sarasota, FL 34231

941-724-3995

Document # Y63183
FEIN # 59-1554565

Enclosed find $43.75 to cover filing fee and

certified copy for amendment of name of corporation

from Family Pharmacy of Sarasota, Inc, to Passcare Corp.

and from address of corporation

3444 Webber St
Sarasota FL 34232

to new address of corporation which is

5472 America Dr
Sarasota, FL 34231

Thank you
Michael Pass

COVER LETTER

TO: Amendment Section
     Division of Corporations

NAME OF CORPORATION: _Family Pharmacy of Sarasota, Inc_

DOCUMENT NUMBER: _463183_

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

Please return all correspondence concerning this matter to the following:

Michael I Pass
Name of Contact Person

Family Pharmacy of Sarasota, Inc
Firm/ Company

3644 Webber St
Address

Sarasota FL 34232
City/ State and Zip Code

familyrxhc @ aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Pass at (_941_) _724-3995_
Name of Contact Person   Area Code & Daytime Telephone Number

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

☐ $35 Filing Fee   ☐$43.75 Filing Fee &   ☒$43.75 Filing Fee &   ☐$52.50 Filing Fee
                Certificate of Status   Certified Copy   Certificate of Status
                                (Additional copy is   Certified Copy
                                enclosed)   (Additional Copy
                                                is enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                        Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Family Pharmacy of Sarasota Inc.

FILED
2012 DEC 20 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

463183

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

_____*The new*
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation
"Corp.," "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the
word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

5472 America Drive
Sarasota FL 34231

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

5472 America Drive
Sarasota FL 34231

**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 _____N/A_____

(Florida street address)

New Registered Office Address: _____N/A_____, Florida_____
(City)   *(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.

_____N/A_____
Signature of New Registered Agent, if changing

Page 1 of 4

If amending the Officers·and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
'(Attach additional sheets, if necessary)
Please note the officer/director title by the first letter of the office title:
P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.
Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

X Change	PT	John Doe
X Remove	V	Mike Jones
_X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ____ Change ____ Add ____ Remove			
2) ____ Change ____ Add ____ Remove			
3) ____ Change ____ Add ____ Remove			
4) ____ Change ____ Add ____ Remove			
5) ____ Change ____ Add ____ Remove			
6) ____ Change ____ Add ____ Remove			

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

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(*if not applicable, indicate N/A*)

N/A

The date of each amendment(s) adoption: _____ 12/18/12 _____

Effective date if applicable: _____

<p style="text-align:center;">*(no more than 90 days after amendment file date)*</p>

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

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
<p style="text-align:center;">*(voting group)*</p>

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated ____12/18/12____

Signature _____
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

_____Michael I Pass_____
(Typed or printed name of person signing)

_____President_____
(Title of person signing)