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OF COUNSEL DAVID M. LANDIS JON E. KANE

## PLEASE REPLY TO: ORLANDO

E-Mail Address Iphalin@mateerharbert.com Direct Line (407) 418-1313 Ext. 113

March 11, 2004

Secretary of State
Division of Corporations
Bureau of Corporate Records
409 East Gaines Street
Post Office Box 6327
Tallahassee, Florida 32314-6327

Re:

Parenteral Therapy Associates, Inc.

Document #95000091023

Dear Sir or Madam:

Enclosed herein please find Articles of Amendment, together with our check in the amount of \$43.75 to cover the following

Filing Fee Certified Copy \$35.00 8.75

TOTAL

\$43.75

Please return a certified copy to me in the enclosed, stamped, self-addressed envelope.

Your assistance in this matter is appreciated.

Very truly yours,

LAWRENCES. PHALIN

LJP:

Enclosure

cc:

Steve Vogt

## ARTICLES OF AMENDMENT

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## ARTICLES OF INCORPORATION

TALLAHASSEE, FLORIDA

Pursuant to Article 607.1001, Florida Statutes, the Articles of Incorporation of the above-named Corporation are amended as follows:

1. Article I is amended to read as follows:

The name of this corporation is BioPlus Specialty Pharmacy Services, Inc.

2. The above amendment has been adopted by the board of directors of the Corporation and the shareholders entitled to vote thereon at a special meeting of the board of directors and shareholders held February 20, 2004, pursuant to Section 607.1003, as required by the laws of the State of Florida.

IN WITNESS WHEREOF, the undersigned President of the Corporation has executed these Articles of Amendment this 20th day of February, 2004.

Parenteral Therapy Associates, Inc.

STATE OF FLORIDA COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this day of February, 2004, by Stephen C. Vogt, as President of Parenteral Therapy Associates, Inc., a Florida corporation, on behalf of the corporation. He/she is personally known to me or produced by the corporation of the corporation of the corporation.

Notary Seal

CLAIRE D. JAKOBSON

OTARY

My Comm Erp 3/13/05

No. CC 987053

N Personall, Known El 9ther I.D.

Notary Public State of Florida

Printed Name: Claure D Jakobson
My Commission Expires: 3(13) 05