

LAW OFFICES OF
BARRY A. DIAMOND, P.A.
CORAL SPRINGS COMMERCE CENTRE
9728 WEST SAMPLE ROAD * POST OFFICE BOX 8824
CORAL SPRINGS, FLORIDA 33065

BRWALD: (954) 321-0000 FAX: (954) 321-0058

September 23, 2002

L01000010413

Department of State
Division of Corporations
Corporate Filings
P. O. Box 6327
Tallahassee, Florida 32314

Re: **CC CITY PHARMACY, LLC**

300008103893--4
-09/30/02--01063--009
*****25.00 *****25.00


Gentlemen:

Enclosed herewith, in duplicate, please find Certificate of Amendment for the above-referenced Corporation.

Also enclosed is my check in the amount of \$25.00 for filing the Certificate of Amendment and a copy to be returned to the undersigned at the above-referenced address.

If you have any questions, please do not hesitate to contact me.

Very truly yours,


BARRY A. DIAMOND

BD/jac

encs.

CERTIFICATE OF AMENDMENT

Pursuant to the provisions of Section 608.411, Florida Statutes, the undersigned Limited Liability Company, as executed and acknowledged by its Manager and Member, hereby executes this Certificate of Amendment as follows:

A. The name of the Limited Liability Company is CC CITY PHARMANCY, LLC.

B. The Amendment as duly adopted is as follows:

The name of the Limited Liability Company shall be changed from CC CITY PHARMANCY, LLC to CC CITY PHARMACY, LLC.

The above Certificate was unanimously adopted at a Special Meeting held on the 8TH day of August, 2002, by the Board of Managers and Members of the Limited Liability Company in accordance with the Florida Statutes, whereby the number of votes cast by the Members for such Certificate of Amendment was sufficient, as evidenced by the execution of this Certificate of Amendment.

(COMPANY SEAL)

CC CITY PHARMANCY, LLC

By: Clarisa G. Castro
Its Manager

Clarisa G. Castro
CLARISA G. CASTRO,
Member

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing Certificate of Amendment was acknowledged before me this 18 day of September, 2002, by CLARISA G. CASTRO, Manager and Member of CC CITY PHARMANCY, LLC, a Limited Liability Company, who (is personally known to me/has produced as identification) and who (did/did not) take an oath.

(SEAL)

Please Print Name: DAVID GONZALEZ
Notary Public, State of Florida at Large
Serial No. (if any): _____



B013102a

THE LAW OFFICES OF BARRY A. DIAMOND, P.A.
9728 WEST SAMPLE ROAD ♦ POST OFFICE BOX 8824 ♦ CORAL SPRINGS, FLORIDA 33065
(954) 752-5000 ♦ FAX: (954) 752-0558