L03000020909

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Doc	cument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to F	Filing Officer:	
j eft v	.	
	na, į	
	Office Use On	ly
•	ero l	•
4 1 1	DCC	
;"	KC I	



900042484819

11/12/04--01035--016 **30.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: RX FRIENDS, LLC (Name of Limited Liability Company)	play gazzaria de la la compa
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
KIRIT PATIDAR (Name of Person)	
RX FRIENDS, LLC	<u> </u>
8152 BRINEGAR CIRC	LE
TAMPA, FL 33647 (City/State and Zip Code)	
For further information concerning this matter, please call:	
KIRIT PATIDAR at (813) 975 (Name of Person) (Area Code & Daytime	7 - 2991 Telephone Number)
Enclosed is a check for the following amount:	
\$30.00 Filing Fee \$\text{Certificate of Status}\$ Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate copy (additional copy is enclosed)	Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	្វ

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RX FRIENDS, LLC		
,	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on 6 10 2003 and assigned document number 1030000 20909	ಆರೆ	
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted liability company:	d by the limited	
	ADDED MANAGING MEMBER:		
	MIHIR SHAH 25810 KIRKWOOD SQUARE		
		_	
	SOUTH RIDING, VA. 2015	L	
	, sth	711 D.1341	कारसम्बद्धिः क कें क ह्यास्त्रकी का सुकारी
Dated	JOVEMBER, 8, 2004	150	
	V Defin	E TE	-
	Signature of a member or authorized representative of a member	•	
	KIRIT PATIDAR. Typed or printed name of signee		
	syped of printed name of signee		

Filing Fee: \$25.00