

LOS000068724

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Division of Corporations

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Florida Department of State
Division of Corporations
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H17000113683ABC

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Account Name : AKERMAN LLP - MIAMI
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April 25, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MATRIX PHARMACY, LLC
3111 W. DR. MARTIN LUTHER KING JR BLVD.
SUITE 800
TAMPA, FL 33607US

SUBJECT: MATRIX PHARMACY, LLC
REF: L05000068724

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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AIXO LLC - L12000023358

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

FAX Aud. #: H17000111368
Letter Number: 117A00007953

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P.O. BOX 6327 - Tallahassee, Florida 32314

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MATRIX PHARMACY, LLC

*(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)*

The Articles of Organization for this Limited Liability Company were filed on 7/12/2005 and assigned
Florida document number L05000068724

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

AIXOS TECH, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

THOMAS CADDY

New Registered Office Address:

12808 Harborwood Dr

Enter Florida street address

Largo

City

Florida 33774

Zip Code

New Registered Agent's Signature. If changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature)
If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

[illegible]

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Dated April 24 2017

Signature of a member or authorized representative of a member

Thomas W. Cardy, as MGR and authorized representative of a member

Typed or printed name of signee

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