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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

	Registration Division of	section Corporations		
SURIEC	_{:T:} Sunl	Meds Pharmacy LL0		
002020	* * * * * * * * * * * * * * * * * * *		mited Liability Company)	
The enclo	osed Article	s of Amendment and fee(s) are su	bmitted for filing.	
Please re	turn all corr	espondence concerning this matte	r to the following:	
		Heather Spinosa		
			Name of Person)	
		Sunmeds Pharmac	rv	
			(Firm/Company)	,,
		5020 Rushbrook	Rd	
			(Address)	<u> </u>
		Land O' Lakes, F	lorida 34638	
			/State and Zip Code)	
For further	er informati	on concerning this matter, please	call:	
	Heathe	er Spinosa	at (813) 504-	1200
•	1100111	(Name of Person)	(Area Code & Daytime	
		the following amount:	CSS OA EUL - Cas &	CO OO EULA BAA
\$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
		AILING ADDRESS:	STREET/COURI	
Registration Section Division of Corporations		gistration Section vision of Corporations	Registration Section Division of Corporations	
P.O. Box 6327			Clifton Building 2661 Executive Center Circle	
	1 4	1141140300, I L J2J17	TOO! DACGUITE CO	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SunMeds Pharmacy LLC

	(Present Name) (A Florida Limited Liability Company)				
FIRST:	The Articles of Organization were filed on document number L06000070513 and assigned				
SECOND:	This amendment is submitted to amend the following:				
	1. Principal and mailling address change to: 5020 Rushbrook Rd, Land O' Lakes, Fl. 34				
2. name change to SunMeds Supplies LLC					
	3. Type of business to Medical Eqipment sales				
Dated De	ecember 26 , 2006 .				
	Signature of a member or authorized representative of a member				
	Heather Spinosa				
	Typed or printed name of signee				