

FROM : LAZARUS

FAX NO. : 3052201440

Feb. 18 2009 03:33PM P1

https://efile.snbiz.org/scripts/efitcovr.exe

LOT 000006180

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000038237 3)))



H090000382373ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305) 552-5973  
Fax Number : (305) 220-1440

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 FEB 18 AM 10: 07

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

EMPIRE PHARMACY CONSULTANTS L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED  
09 FEB 18 PM 2:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

G. MCLEOD

FEB 19 2009

EXAMINER

H09000038237

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 FEB 18 AM 10:07

EMPIRE PHARMACY CONSULTANTS 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 01/17/07 and assigned  
Florida document number L07000006180

This amendment is submitted to amend the following:

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

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

**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: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_  
(Enter Florida street address)

\_\_\_\_\_, Florida  
(City) (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 608, 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.*

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

H09000038237

H09000038237

amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

GR = Manager
GRM = Managing Member

Table with columns: Title, Name, Address, Type of Action. Row 1: GRM, NANCY MVR, [blank], [X] Remove.

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

LIANGING PRINCIPLE & MAILING ADDRESS:
247 SW BK STREET
#218
MIAMI FL 33130

Dated FEB 18, 2009

Signature of a member or authorized representative of a member
MICHAEL CHEN
Typed or printed name of signer

H09000038237