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2011 FEB 10 AM IN: 41

SECRETARY OF STATE
OF STATE

C. LEWIS
FEB 1 1 2011
EXAMINER

COVER LETTER

Division of Co		·	
SUBJECT:	US-RX [Distribution, LLC	
· ·	Name of Limi	ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Taeho Oh	
		Name of Person	
	u.	S-RX Distribution LLC	
		Firm/Company	
		8237 Sunset Strip	
		Address	
		Sunrise, FL 33322	
		City/State and Zip Code	
	F-mail address:	fastmed@att.net to be used for future annual report notifica	ation)
For further information	concerning this matter, please of		
	Taeho Oh	at (08-3081
Name	of Person	Area Code & Daytime	elepnone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2011 FEB 10 AM 11: 48 US-RX Distribution LLC (Name of the Limited Liability Company as it now appears on our records.) ECRETART OF STATE (A Florida Limited Liability Company)

TALE AHASSEE, FLORIDA The Articles of Organization for this Limited Liability Company were filed on 1/15/2008 and assigned L08000005664 Florida document number 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." 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) 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 _ Zip Code City

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

If 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:

MGR = Manager MGRM = Managing Member Title Title Name 1 **Address Type of Action** MGR Celestino Avila 3240 Calle Largo Dr. ☐ Add Remove Hollywood, FL 33020 ☐ Remove _ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Taeho Oh = 70% Deysi M. Polanco = 30% February 4 2010 Dated_ Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Taeho Oh
Typed or printed name of signee