

L 1 000000 53935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

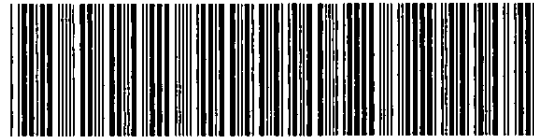
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B. KOHR

JUL 31 2012

EXAMINER



300237658673

RECEIVED
DEPARTMENT OF STATE
12 JUL 30 PM 2:00

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATION
12 JUL 30 AM 10:57



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 293388 7776655
AUTHORIZATION : *Spuddelean*
COST LIMIT : \$ 25

12 JUL 30
SECRETARY OF STATE
DIVISION OF CORPORATIONS
AH 105 57

ORDER DATE : July 30, 2012

ORDER TIME : 12:48 PM

ORDER NO. : 293388-005

CUSTOMER NO: 7776655

DOMESTIC AMENDMENT FILING

NAME: EVERGLADE SCRIPTS, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis -- EXT# 2926

EXAMINER'S INITIALS: _____

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Everglade Scripts, LLC

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

FILED
DIVISION OF CORPORATIONS
12 JUL 30 AM 05:51

The Articles of Organization for this Limited Liability Company were filed on 05-19-2010 and assigned
Florida document number L10000053935

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 "LLC."

Enter new principal offices address, if applicable:

99 NW 183RD ST, SUITE 205A

(Principal office address MUST BE A STREET ADDRESS)

MIAMI GARDENS, FL 33169

Enter new mailing address, if applicable:

99 NW 183RD ST, SUITE 205A

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI GARDENS, FL 33169

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)

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	Name	Address	Type of Action
ingrm	MORDECHAI AILOS	223 EAST FLAGLER ST. SUITE 218 MIAMI, FL 33131	☐ Add ☒ Remove
ingrm	FREDZIA NAVAS	8075 NW 7TH ST. MIAMI, FL 33126	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated July 24, 2012

Signature of a member or authorized representative of a member

Chung Ping Yu

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00