L10000124912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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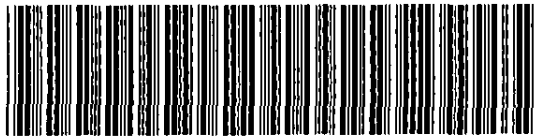

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Rivera, Maribel

From: Ramon Cortes [rmcortes@aol.com]
Sent: Thursday, May 19, 2011 10:20 AM
To: CorpAddressChange
Subject: My Family Pharmacy & Discount, LLC.

Good morning:

I am requesting to change the principal office and the mailing address of the subject LCC from

180 SW 104th Court
Miami, Fl 33174

to

8410 West Flagler St
Suite 105-B
Miami, Fl 33144

I am providing the following additional information:

Document number: L10000124912
Date of filing: Dec 6, 2010
Registered agent: Ramon Cortes

Please contact me if you need any additional information at 305-877-1283.

Thank you.

Ramon Cortes
Registered Agent

Sent from my iPhone