(((H12000139504 3)))

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EXAMINER

H12000139504

ARTICLES OF AMENDMENT. ARTICLES OF ORGANIZATION OF

	RED PHA	RMACY LLC		3
<u> </u>	me of the Limited Liability Con (A Florida Limit		rs on our records.)	Ģ
The Articles of Organization	for this Limited Liability Comp	any were filed on	01/31/2012	and assigned
Plorida document number	L12000014850			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited)	liability company he	<u>16</u> ;	
The new name must be distingu"LL.C."	ishable and end with the words "I	Limited Liability Comp	any," the designation '	LLC" or the abbreviation
Enter new principal offices	address, if applicable:			
Principal office address MI	<u>IST BE A STREET ADDRESS</u>	2		
Enter new mailing address,	if applicable:			
Malling address MAY BE A	POST OFFICE BOX			
	tered agent and/or registered new registered office address		our records, enter	the name of the new
Name of New Regi	stered Agent			
New Registered Of	fice Address:		71 - 2 - 4 - 4	
		В	nter Florida street aa	aress
		City	, Florida	Zip Code
New Degistered Agent's Sign.	sture, if changing Registered As			ed and

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

Page 1 of 2

MGR = Manager

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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:

MGRM = Managing Member Title Name Address Type of Action JACQUELINE HADAD MGR 350 NW 27TH AVE ☑ Add MIAMI, El 33125 Ramove □ Ада Remove DbA □ Remove ☐ Add Ramoye ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,) **MAY 24** 2012 Dated. Signature of a member or anthorized representative of a member

> Typod or printed name of signee Page 2 of 2

> > Filing Fee: \$25.00