

**L12000116339**

Florida Department of State  
Division of Corporations  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
LUMI PHARMACY LLC.**

Certificate of Status	0
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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

LUMI PHARMACY 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 Sept 11, 2012 and assigned Florida document number L12000116339.

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)

5540 SW 8 ST.  
MIAMI FL 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5540 SW 8 ST.  
MIAMI, FL 33134

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:

ALINA M DE VAZONA

New Registered Office Address:

5540 SW 8 ST.

Enter Florida street address

MIAMI  
City

Florida

33134  
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 605, F.S. (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.

[Signature]  
If Changing Registered Agent, Signature of New Registered Agent

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

MGR - Manager  
AMBR - Authorized Member

Title	Name	Address	Type of Action
MGR	ALINA M. DE VORANA	5540 SW 8 ST. MIAMI, FL. 33134	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	KETTY ARMAS	261 WESTWARD DR. SUITE 108-109 MIAMI SPRINGS, FL. 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Add <input type="checkbox"/> Remove

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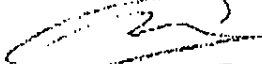
#7804 P.004/004

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E. Effective date, if other than the date of filing: FEB. 28, 2014 (optional)  
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated: MARCH 3, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
NINA M DE VARONA  
\_\_\_\_\_  
Typed or printed name of signee

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