Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000153223 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone Fax Number

: (305)552-5973 : (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

OPTIMUN RX PHARMACY LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$25.00	

JUN 23 2015

Y SULKER

Corporate Filing Menu

Help

H 15000153223

	OPTIMUN RX PHARMACY LLC		
	The Articles of Organization for this Limited Liability Company were filed on Obline and assigned Florida document number LIVOOO8 1822		•
	This amendment is submitted to amend the following:		
	Delete: Misleidus Gonzalez.		
			•
	Add: VAMILA Varquer de Llado as AMB	2 &	RA
١i	the address: 6900 w 32nd Ave		
٠,	STE 10		
	HIALEAH FL 33018		
	AR C		
,	# 22 ***********************************	Parent	
	These articles of amendment were adopted on 00-22-15 \$\frac{15}{52}\$. \$\frac{5}{52}\$.	States:	
	Dated		
	Signature of a member or authorized representative of a member		
•	MISICIANS GONZAICZ (MGRM Typed or printed name of signee	,	
	New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
	Signature of New Registered agent, if changing		