17-2023-22-42:28 E-DT Division of Corporations	To: 19506176383	Page: 2/6	From: Dhruv Manage	ment Fax: 7274992 9/27/23 - 9/46 PM
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Fax: 7274992716

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	С	OVER LETTER	····
TO: Registration Sec Division of Corr			
Wesley Cha	pel Pharmacy LLC		
SUBJECT:Name of Limited Liability Company			
The enclosed Articles of a	Amendment and fee(s) are subm	sitted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
	Hardikkumar Patel		
		Name of Person	
	Wesłey Chapel Pharmacy L	LC	
Firm/Company			
2812 W Martin Luther King Jr Blvd			
Address			
	Tampa, FL 33607		
		City/State and Zip Code	
	licensing@rxplusmanageme	nt.com	
		0 be used for future annual report notif	(0.17)
For further information of	concerning this matter, please or		
Hardikkumar Patel		813 328-3970 at ()	e Telephone Number
Name	ot Person	Area Code Dayume	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addr</u> Registration Division of P.O. Box 63 Tallahassee	Section Corporations 27	<u>Street Address:</u> Registration Se Division of Co The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee oc Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 01/18/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
		22
The new name must be distinguishable and contain the words "Limited Liabi	ity Company," the designation "LLC" or the ab	previation "L.L.C."
Enter new principal offices address, if applicable:	2653 Bruce B Downs Blvd Suite 115	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2653 Bruce B Downs Blvd Suite 115 Wesley Chapel, FL 33540	
	·	
	·	

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:	Hardikkumar Patel		
New Registered Office Address:	2812 W Martin Luther King Jr Blvd		
	Enter	Florida street address	
	Tempa	, Florida ³³⁶⁰⁷	
	City	Zıp 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. 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

MGR = Manager

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member Title Name Address Type of Action AMBR Vijay Patel 6903 CONGRESS STREET bbAÜ _____ NEW PORT RICHEY, FL 34653 Remove □Change DAd _____ □Change _____ 🗆 🗛 🔤 🗆 🗆 _____ 🗆 Remove _____ 🗇 Change _____ ORemove □Change DAdd _____ 🖸 Remove _____ 🗆 Change _____ 🖸 Add _____ 🖸 Remove _____ Change

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

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	22	, 2023
		Coppe, 180
		Signature of a member or authorized representative of a member
	Hardikkumar Patel	
		Typed or printed name of signee

Filing Fee: \$25.00