

P000000115969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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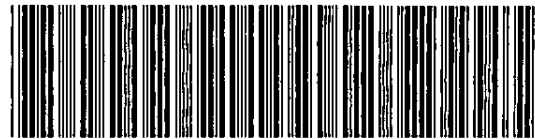
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
12 AUG - 2 PM 12:48

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Suntree Pharmacy, Inc.  
DOCUMENT NUMBER: P00000115969

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diahn Clark  
Name of Contact Person  
Suntree Pharmacy, Inc.  
Firm/ Company  
7640 N. Wickham Rd. # 117  
Address  
Melbourne, FL 32940  
City/ State and Zip Code  
diahnclark@earthlink.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diahn Clark at ( 321 ) 253-3535  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy.<br>(Additional Copy<br>is enclosed) |
|--|--|---|---|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Suntree Pharmacy Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P000000115969

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Diahn Clark  
Name of Contact Person

Suntree Pharmacy Inc.  
Firm/Company

7640 N. Wickham Rd. Suite 117  
Address

Melbourne FL 32940  
City/State and Zip Code

diahnclark@earthlink.net  
E-mail address: (to be used for future annual report notification)

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Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 20, 2012

DIAHN L. CLARK  
SUNTREE PHARMACY INC.  
7640 N. WICKHAM RD STE 117  
MELBOURNE, FL 32940

SUBJECT: SUNTREE PHARMACY, INC.  
Ref. Number: P00000115969

We have received your document for SUNTREE PHARMACY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts  
Regulatory Specialist II

Letter Number: 812A00019252

2012 AUG -2 AM 10:20  
SUNTREE PHARMACY OF FLORIDA

ARTICLES OF CORRECTION

for

Suntree Pharmacy, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

P00000115969

Document Number (if known)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 AUG -2 PM 12:48

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct

AOI

(Document Type Being Corrected)

filed with the Department of State on

12/15/2000

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Address Change FROM 7025 N.

Wickham Rd. Suite 113 B Melbourne

FL 32940

Correct the inaccuracy, incorrect statement, or defect:

Address Change To:

7640 N. Wickham Rd. Suite 117

Melbourne FL 32940

D Clark, Pres

(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Diahn Clark

(Typed or printed name of person signing)

Pres

(Title of person signing)

Filing Fee: \$35.00