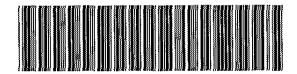
## P01000058344

_
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(-ii) - iii - i
PICK-UP WAIT MAIL
<del></del>
(D)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special medianions is thing of the con-

Office Use Only



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02 MOV 19 PM 12: 58

DIVISION OF COLUMNATION





ACCOUNT NO. : 072100000032

REFERENCE : 820215 7237

AUTHORIZATION :

COST LIMIT : \$ 35.00

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ORDER DATE: November 15, 2002

ORDER TIME : 11:19 AM

ORDER NO. : 822215-010

CUSTOMER NO: 7237021

CUSTOMER: Ms. Marcia A. Walker-guy-72370

Infomed, P.c. 8201 Peters Road

Suite 1000

Plantation, FL 33324

## DOMESTIC AMENDMENT FILING

NAME: ECARE PHARMACY, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER'S INITIALS:



## FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

November 19, 2002

CSC ATTN: SARA TALLAHASSEE, FL

SUBJECT: ECARE PHARMACY, INC.

Ref. Number: P01000058344

We have received your document for ECARE PHARMACY, INC. and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following to the fo

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2002 annual report/uniform business report. The entity must be reinstated before this document can be filed.

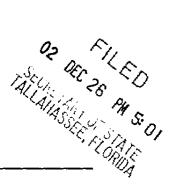
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 602A00062564

## ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF



		¥	
	ECARE PHARMACY, INC		
	(present name)		
(Do	cument Number of Corporation	n (If known)	
Pursuant to the provisions of sect the following articles of amendmen		tes, this Florida profit corporation addition:	opts
FIRST: Amendment(s) adopted: ARTICLES: AMENDMENT TO	(indicate article number(s) bo D ADD AN OFFICER -MAXITO E	peing amended, added or deleted) PEAN - CFO - Chied Financial	officet
CHANGE TITLES FOR TWO OTHER OF	FICERS: MARCIA WALKER-GUY HAROLD GUY ~ SECR	•	
CHANGE OF PPOB ADDRESS: 8201	i nember base		

**SECOND:** If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: T	The date of each amendment's adoption:
FOURTH:	Adoption of Amendment(s) (CHECK ONE)
Ů.	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
	The amendment(s) was/were approved by the shareholders through voting groups.  The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient
	for approval by
	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
	Signed this 6/1 day of 2002
Signature_	Mercia a. Dolher Ju
	(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)
	OR  (By a director if adopted by the directors)
	OR (By an incorporator if adopted by the incorporators)
	Marcia Walker-Guy (Typed or printed name)
	President (Title)