## P03000116464

(Requ <b>es</b> tor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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RECEIVEL 03 DEC -5 PM 3: 46
03 DEC -3 AN II: 23 SECRETARY OF STATE
DIVISION OF CORPORATIONALLAHASSEE, FLORES

C. Coulliste DEC 0 5 2003

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LAZARUS CORPORATE FILIN	G SERVICE
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CORPORATION NAME(s) & DO	CUMENT NUMBER(S) (if known):
1. CHAFNA SOL	OTIONS, INC.
(Corporation Name)	(Document #)
2. (Corporation Name)	(Ductment #)
3	
(Corporation Name)	(Document #)
(Corporation   arrie)	(Document #)
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NEW FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
_	
OTHER FUNGS	REGISTRATION/ QUALIFICATION QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Name Reservation	Reinstatement
	Trademark
	Other
•	Other Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 3, 2003

**LAZARUS** 

TALLAHASSEE, FL

SUBJECT: PHARMA SOLUTIONS INC

Ref. Number: P02000130640

RECEIVEL 3: LANGE CHECKS)

We have received your document for PHARMA SOLUTIONS INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2003 annual report/uniform business report.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: 103A00064999

## ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF

P03000116468
Pharma - Solution Plus, Inc
Pursuant to the provisions of section 607.1006, Florida Statutes; this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:
FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)
Directors shall now read as follows:
President >> Zulema Fabritzio (Delete)
President 7 Lester Guthernez (Add)
7891 W FLAGLER ST. # 119
minm1-Fc-33144

**New Registered Agent** 

Lester Gutierrez 1891 W FLAGLER ST. # 119 Minmi - Fi- 33144-2376 O3 DEC -5 PH 3: 16
SECRETARY OF STATE
TALLAHASSEF 5: OBINA

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: The date of each amendment's adoption: 12/2/03	
FOURTH: Adoption of Amendment(s) (check one)	
The amendment(s) was/were approved by the shareholders. The number of votes ca for the amendment(s) was/were sufficient for approval.	sŧ
☐ The amendment(s) was/were approved by the shareholders through voting groups.	
The following statement must be separately for each voting group entitled to vote separately on each amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval by	· 1.
(voting group)	
<ul> <li>□ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.</li> <li>□ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.</li> </ul>	
Signed this <u>02</u> day of <u>DECEMBER</u> , 2003.	
Signature (By the Chairman or Vice Chairman of the directors,  President or other officer if adopted by the shareholders)	
OR (By a director if adopted by the directors)	
(FR) (By an incorporator if adopted by the incorporators)	
ZULEMA FABRIZIO	
Typed or printed name	

Having been named as registered agent and to accept service of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

Registered Agent Signature