PU500031974

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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Yomy Pharm	nacy Discount Inc	
DOCUMENT NU	JMBER: P05000021974		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
Rac	chel Tolley, Esq.		
	(Name o	of Contact Person)	
Jor	nathan H. Green & Assoc	iates	
	(Fir	m/ Company)	
799	Brickell Plaza, Suite 700		
		(Address)	
Mia	mi, Florida 33131		
	(City/ St	tate and Zip Code)	
For further inform	ation concerning this matter,	please call:	
Rachel Tolley, Esq.		at (305) 372-51	
(Nam	e of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a chec	k for the following amount:		
□\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy 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 C Tallahassee, FL 32301	



JONATHAN H. GREEN JHG@JHGLAW.COM

CATHERINE HITE CATHERINE@HITE-LAW.COM DIRECT TELEPHONE (305) 373-8100 DIRECT FACSIMILE (305) 373-8180

JAIME D. LEVINE

RACHEL L. TOLLEY RLT@JHGLAW.COM 799 BRICKELL PLAZA SUITE 700 MIAMI, FLORIDA 33131 TELEPHONE (305) 372-5100 FACSIMILE (305) 372-9600

May 24, 2007

Via First Class Mail

Amendment Section
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

Enclosed please find the Articles of Amendment for Yomy Pharmacy Discount, Inc., as well as Check #5007 in the amount of \$52.50 representing the Filing Fee, Certificate of Status and Certified Copy. Should you have any further questions, please do not hesitate to contact our office.

Sincerely,

JENNIFER M. HOLODY

JMH

Enclosures (2)

Articles of Amendment to Articles of Incorporation of

FILED 07 MAY 30 AM 7: 09

Yomy Pharmacy Discount Inc

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of corporation as currently filed with the Florida Dept. of State)

P05000021974			
(Document number of corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:			
NEW CORPORATE NAME (if changing):			
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")			
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)			
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)			
Lilivet Gonzalez, President			
1936 NW 6th Street			
Miami, Florida 33125			
(Attach additional pages if necessary)			
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A			
(continued)			

The date of each amendment(s) adoption: 4/19/07				
Effective date if applicable:	·			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
	was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.			
	was/were approved by the shareholders through voting groups. The it must be separately provided for each voting group entitled to vote imendment(s):			
"The number o	f votes cast for the amendment(s) was/were sufficient for approval by			
	(voting group)			
	was/were adopted by the board of directors without shareholder action was not required.			
The amendment(s) shareholder action	was/were adopted by the incorporators without shareholder action and was not required.			
selec	director, president or other officer - if directors or officers have not been sted, by an incorporator - if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)			
Liliv	vet Gonzalez			
	(Typed or printed name of person signing)			
Pre	esident			
<u></u>	(Title of person signing)			

FILING FEE: \$35