

P05000097095

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

304952

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000124013 3)))



H110001240133ABCN

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6360

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FILED
11 MAY -4 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

11 MAY -4 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**COR AMND/RESTATE/CORRECT OR O/D RESIGN
SILVER STAR PHARMACY, INC.**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

Amk 5/9/11

<https://efile.sunbiz.org/scripts/efilcovr.exe>

5/4/2011



HN 000124013

Articles of Amendment
to
Articles of Incorporation
of

SILVER STAR PHARMACY, INC

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

P 05000097095

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

12304 SW 127 AVE

MIAMI, FL 33186

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12304 SW 127 AVE

MIAMI, FL 33186

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

YANET FERNANDEZ

12304 SW 127 AVE

New Registered Office Address:

(Florida street address)

MIAMI

(City)

Florida 33186

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

HN 000124013

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(attach additional sheets, if necessary)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|------------------------|---|--|
| <u>P</u> | <u>YANET FERNANDEZ</u> | <u>14794 SW 177 TH TERR</u> <u>MIAMI, FL 33187</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |
| <u>P</u> | <u>YANET FERNANDEZ</u> | <u>12304 SW 127 AVE</u> <u>MIAMI, FL 33186</u> | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| <u>V</u> | <u>REINALDO LARA</u> | <u>14794 SW 177TH TERR</u> <u>MIAMI, FL 33187</u> | <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. 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:

(if not applicable, indicate N/A)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(attach additional sheets, if necessary)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|---------------|-------------------------------------|--|
| V | REINALDO LARA | 12304 SW 127 AVE MIAMI, FL 33186 | <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add <input type="checkbox"/> Remove |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. 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:
(if not applicable, indicate N/A)

H11000124013

The date of each amendment(s) adoption: 05/02/2011

(date of adoption is required)

Effective date if applicable: _____

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

(CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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 _____"
(voting group)

☐ 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.

Dated 05/02/2011

Signature _____

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

YANET FERNANDEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Page 3 of 3

H11000124013