Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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| | | | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN MEGA PHARMACY DISCOUNT, INC.

| Certificate of Status | 0 |
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(<u>)</u>

Electronic Filing Menu

Corporate Filing Menu

Articles of Amendment to Articles of Incorporation

| A | rticles of Incorporatio of |)D | | |
|---|---|---|-----------------------------------|---------------|
| | CY DISCOUNT, I | | | |
| (Name of Corporation as curre | ntly filed with the Florid | a Dept. of State) | | |
| P060 | 00055560 | | | |
| (Document Numl | per of Corporation (if known | wn) | | |
| Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation: | , Florida Statutes, this Fl | lorida Profit Corporatio | m adopts the fol | lowing |
| A. If amending name, enter the new name of | the corporation: | | | |
| MEGA QUAL | ITY CORPORATION | | The new | , |
| name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the aname must contain the word "chartered," "professional". | ne word "corporation," designation "Corp," "Inc essional association," or | "company," or "inco ;" or "Co". A profess the abbreviation "P.A." | porated" or the lonal corporation | ; ; |
| B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u> | | · | 10 APR | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC | <u> </u> | | 20 PM 2: 49 | FILFO |
| D. If amending the registered agent and/or renew registered agent and/or the new registered | | n Florida, enter the nam | ne of the | |
| Name of New Registered Agent: | | <u>, , , , , , , , , , , , , , , , , , , </u> | | |
| New Registered Office Address: | (Florida street a | ddress) | | |
| <u>-</u> | | , Florida | | |
| | (City) | (Zip Code) | | |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag | | nd accept the obligation | s of the position. | |
| Siz | gnature of New Registered | Agent, if changing | | |

| 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>Tit</u> | <u>le</u> | Name | Address | Type of Action |
|------------|--------------|---|---|-----------------------|
| | | | | ☐ Add ☐ Remove |
| | | | | Add Remove |
| _ | | | | Add Remove |
| | | g or adding additional Articles, enter cl ional sheets, if necessary). (Be specific | | |
| | | | | |
| F . | provisions | dment provides for an exchange, reclar for implementing the amendment if no applicable, indicate N/A) | ssification, or cancellation of iss t contained in the amendment i | ued shares, tself: |
| | | | | |
| | | | | |
| | | | | |

| The date of each amendment | (4) adoption: 04-20-2010 |
|---|--|
| | (date of adoption is required) |
| Effective date if applicable: | (no more than 90 days after amondment file data) |
| | the more ment to sell a shier dimensional transmission |
| Adoption of Amendment(s) | (CERCIC ONE) |
| The amendment(s) was/we by the shareholders was/w | re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval. |
| | re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s): |
| "The mounter of votes | onet for the emendment(s) was/were sufficient for approval |
| by | , M |
| | (भग्नाष्ट्र शुष्यापृ) |
| The amendment(s) was/we setion was not required. | re adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder |
| Dated 04-2 | 20-2010 |
| ao L | a director, president or other officer – if directors or officers have not been seted, by an incorporator – if in the hands of a receiver, trustee, or other court seined fiduciary by that fiduciary) |
| · | HECTOR OQUENDO |
| | (Typed or printed name of person signing) |
| · | D |
| | (Title of person signing) |