# to 6000793

(Requestor's Name)	
(Address)	500173426
(Address)	
(City/State/Zip/Phone #)	03/30/1001017011
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	١.
Special Instructions to Filing Officer:	AL MASSEE FL

Office Use Only

3/2/10



065

\*\*43.75





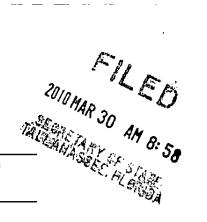
#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION:	DOCTORS N	MEDICAL PHA	ARMACY INC	<u> </u>
DOCUMENT NU	MBER:	······································	P06000079	375	
The enclosed Article	les of Amendment a	nd fee are submitte	d for filing.		
Please return all con	rrespondence concer	ning this matter to	the following:		
<del>.</del>	·	RODOLFO (			_
		Name of Conta	ect Person		
_	DOC	TORS MEDICAL	PHARMACY II	NC	_
	Firm/ Company				
	124	10 B NW 119 ST	MIAMI FL 3316	7	
-	Address				
		MIAMI FLORI	ΠΔ 33167		
-		City/ State and		· · · · · · · · · · · · · · · · · · ·	_
	E-mail address: (	to be used for future a	nnual report notifica	tion)	
For further informa	tion concerning this	matter, please call	:		
	OOLFO CEPERO	•	305	970-1158	
	of Contact Person	at (	/	me Telephone Numb	<del></del> per
Enclosed is a check	for the following ar	mount made payab	le to the Florida I	Department of Sta	ate:
\$35 Filing Fee		tus Cer	.75 Filing Fee & tified Copy ditional copy is enclo	osed) Certified	te of Status
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Amer Divis Clifto	t Address Idment Section Ion of Corporation In Building Executive Center		

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of



### **DOCTORS MEDICAL PHARMACY INC**

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

#### P06000079375

(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:

ame must be distinguishable and contain t bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "proj	designation "Corp," "Inc,"	or "Co". A professional corporation
B. Enter new principal office address, if appl	, , , , , , , , , , , , , , , , , , ,	- N. S.
Principal office address <u>MUST BE A STREE</u>		
	·= ·	<del> </del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		·
IMMIIING MAPPES WAY KE A PIISI IIFFII	JE BUX)	
(Maning damess MATT BE ATTOST OTTE		<u>.</u>
(maining mainess <u>mart DD AT OUT OTT</u>		<del></del>
		Unvide antantha nama af tha
If amending the registered agent and/or renew registered agent and/or the new registered.	egistered office address in F	lorida, enter the name of the
). If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in F	lorida, enter the name of the
). If amending the registered agent and/or re	egistered office address in F	lorida, enter the name of the
). If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in F	
O. If amending the registered agent and/or renew registered agent and/or the new registered Agent:  Name of New Registered Agent:	egistered office address in F stered office address:	ress)
O. If amending the registered agent and/or registered agent and/or the new registered Agent:  Name of New Registered Agent:	egistered office address in F stered office address:	
O. If amending the registered agent and/or renew registered agent and/or the new registered Agent:  Name of New Registered Agent:	egistered office address in Fitered office address:  (Florida street address)	ress), Florida

## 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>Ty</u>	pe of Action
PD	VENTURA DE I	PAZ 1240 NW 119 ST MIAMI FL331		Add Remove
<u>PD</u>	LUIS A PORTAI	1240 NW 119 ST MIAMI FL 331	- 6 □ - □	Add Remove
<del></del>				Add Remove
	ding or adding addition dditional sheets, if neces	nal Articles, enter change(s) here: ssary). (Be specific)		
provisi		r an exchange, reclassification, or cancellation of is the amendment if not contained in the amendment $N/A$ )		
RODOLF	O CEPERO	50 SHARES		· · · · · · · · · · · · · · · · · ·
VENTUR	A DE PAZ	50 SHARES		

The date of each amendmen	t(s) adoption: JANUARY 28 2010
Effective date if applicable:	JANUARY 28 2010
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed 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/we action was not required.	ere 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 MAI	RCH 25 2010
(By	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RODOLFO CEPERO
	(Typed or printed name of person signing)
	PD
	(Title of person signing)