P070000 46626

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SECRETARY OF STATE

JUL 0 1 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: HOLIDAY PHARMACY INC. DOCUMENT NUMBER: P07000046620 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Venkata Emandi Name of Contact Person Firm/ Company 5723 Westshore Drive Address New Port Richey, FL 34652 City/ State and Zip Code RAOFLORIDAE GMAIL. COH E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 727 -534-4590 Venkata Emandi Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

HOLIDAY PHARMACY INC.	01			
(Name of Corporation as curre	ntly filed with the Florida De	pt. of State)		
P07000046620				
(Document Numbe	r of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation	adopts the following	3 amendme	ent(s) to
A. If amending name, enter the new name of the corporation:			The Comme	2
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." of word "chartered." "professional association." or the abbreviation	" "Co". A professional corpo			, <
B. Enter new principal office address, if applicable:	5723 Westshore Drive			3.70
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	New Port Richey, FL 34	652	5,:	
				S
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5723 Westshore Drive			
	New Port Richey, FL 34	652		
D. If amending the registered agent and/or registered office agent and/or the new registered office addr	Idress in Florida, enter the na	ame of the		
Name of New Registered Agent Venkata Emandi	<u> </u>			
5723 Westshore Drive	•			
(Florida	street address)			
New Port Richey		, Florida		
New Registered Office Address:		(Zip C		

Signature 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	MR	R Patel	6815 N. Dale Mabry Hwy, Unit B
Add			Tampa, FL 33614
x Remove			S-1.
2) Change	PSTD	Venkata Emandi	5723 Westshore Drive
X Add			New Port Richey, FL 34652
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

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)	(Attach	ading or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
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provisions for implementing the amendment if not contained in the amendment itself:		
provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)	. <u>If an ar</u> nrovis	nendment provides for an exchange, reclassification, or cancellation of issued shares,
	(i)	not applicable, indicate N/A)

•	06/10/2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adby the shareholders was/were su	opted by the shareholders. The number of votes cast for the amenda afficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following start 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	er
06/10/2010	5	
Dated	1. Ravideur	
	irector, president or other officer – if directors or officers have not b	
	d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary)	court
	Venkata Emandi	
	(Typed or printed name of person signing)	
	PSTD And Registered Agent	
	(Title of person signing)	