## P08000058737

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APR 10 2019 T. LEMIEUX

## Articles of Amendment to Articles of Incorporation of

West Atlantic Pharmacy Inc

of Corporation as currently filed with the Florida Dept. of State)
The second Number of Comments of the second
(Document Number of Corporation (if known)
7.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
name of the corporation:
The new
ntain the word "corporation," "company," or "incorporated" or the abbreviation mation "Corp," "Inc," or "Co". A professional corporation name must contain the fation," or the abbreviation "P.A."
, if applicable: STREET ADDRESS)
nd/or registered office address in Florida, enter the name of the ew registered office address:
Amira Melika
7495 West Atlantic Ave, Suite 206
Delray Reach
<del></del>
Amira Melika  7495 West Atlantic Ave, Suite 206  (Florida street address)

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		Wesla Hargrove	7495 West Atlantic Ave Suite 206
Add			Delray Beach, FL 33446
X Remove			
2) Change		Amira Melika	7495 West Atlantic Ave Suite 206
X Add			Delray Beach, FL 33446
Remove			<del></del>
3 ) Change			
Add			
Remove			
4) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
5) Change			
Add			
Remove			<del></del>
6) Change			
Add			
Remove			<u> </u>

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
N// ·	
<del>-, - , , ,</del>	
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	<u> </u>
P 16	
provisions for implementing the ame  (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
N/A	

The date of each amendment(s) adoption:	, if other than
13	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as
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.	
March 26, 2019 Dated	
Signature  (By 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)	
Amira Melika	·
Typed or printed name of person signing)	./ ,
(Title of person signing)	esident

the

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