FROM SI LAZARLIS O 8 ON NO. 3052301446 S Gugariz 2009 12: 40FF FM

Florida Department of State

Division of Corporations
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FIRST SOLUTION PHARMACY INC

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8/12/2009 12:21 PM

FROM : LAZARUS

FAX NO. :3052201440

Aug. 12 2009 12:40PM P2.

Articles of Amendment

Articles of Incorporation

of

FIRST SOLUTIO	71-62-76-2			,	
(Name of Corporation as currently	v filed with the	Florida Dept. o	<u>f State</u>)		
	0086204		÷		•
(Document Number	of Corporation	(if known)			
Pursuant to the provisions of section 607.1006, Famendment(s) to its Articles of Incorporation:	lorida Statutes,	this <i>Florida Pr</i>	ofit Corporation	adopts th	e following
A. If amending name, enter the new name of the	e corporation:				
					i new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the desname must contain the word "chartered," "profess	signation "Corp	," "Inc," or "Co	o". A profession	orated" o nal corpo	r the ration
• •				30	9
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	DDRESS)			FG.	2 7
				£	6
				SIR	2
				THO O	呈〖
C. Enter new mailing address. If applicable: (Mailing address MAY BE A POST OFFICE)	ROY)			. F. S	ع و
(Italiang united MAT 1915711 VIST VITTED	<u> </u>			95	5
•	<u></u>			<u> </u>	à T
D. If amending the registered agent and/or registered	stered office ad	<u>dress in Florida</u>	, enter the name	e of the	
new registered agent and/or the new register	eu unice adure	<u>33.</u>		. **	
Name of New Registered Agent:					
New Registered Office Address:	(Florida	street address)			
			, Florida_		
	(City)		(Zip Code)		_
New Registered Agent's Signature, if changing	Registered Ave	nt:			
I hereby accept the appointment as registered ager	nt. I am familia	r with and accep	t the obligations	of the pos	ition.
Sign	ature of New Re	gistered Agent, i	f changing		

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If amending the Officers and/or Directors, onter 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>	Address	Type of Action
Presid	LUIS A ROCA	5554 SW 8 ST CORAL GABLES FL 33134	
PRES	MARTIN IRAN A	5554 SW 8 ST CORAL GABLES F 33134	☐ Add ☐ Remove
(allach a	dditional sheets, if necessury). (R	e specific)	
provisi	nendment provides for an exchan ons for implementing the amendn out applicable, indicate N/A)	ge, reclassification, or cancellation of tent if not contained in the amendmen	ssued shares, t itself;
·			
	·		

FAX NO. :3052201440 H 0 9 0 0 1 8 0 9 0 5

The date of each amendmen	it(s) adoption; 08/11/2009
Effective date <u>if applicable</u> :	08/11/2009 (date of adoption is required)
Estecuve date <u>il applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment ore sufficient for approval.
The amondment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statened 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
try	
, — <u>— — — — — — — — — — — — — — — — — —</u>	(voting group)
action was not required.	ere adopted by the hoard of directors without shareholder action and shareholder action and shareholder action and shareholder action and shareholder
Dated 08/1	1/2009
Cirmotuna	
sele	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)
	MARTIN IRAN A
	(Typed or printed name of person signing)
	SECRETARY
•	(Title of person signing)