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SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SUNSH	INE PRARMACY AND SUPPLIES INC
DOCUMENT NUMBER: P080001044	46
The enclosed Articles of Amendment and for	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
JOSE ESCARPIO	
(Na	me of Contact Person)
ESCARPIO & COMPA	ANY
	(Firm/ Company)
9580 SW 107TH AVE S	STE 201
	(Address)
MIAMI, FL 33176	,
(Cit	y/ State and Zip Code)
For further information concerning this mat	ter, please call:
JOSE ESCARPIO	at (305) 275-0055
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	nt:
□\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2008 DEC 10 PH 2: 52

SECRETARY SET

SUNSHINE PRARMACY AND SUPPLIES INC

P08000104446

(Name of corporation as currently filed with the Florida Dept. of State) AHASSEE, FLORIDA

(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(sand/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLE II -
PRINCIPAL PLACE OF BUSINESS:
2475 NW 95TH AVE STE 7, DORAL FL, 33172
MAILING ADDRESS:
2475 NW 95TH AVE STE 7, DORAL FL, 33172
,
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provision for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate

(continued)

The date of each amendment(s) adoption: DEC 04, 2008	
Effective date if applicable: (no more than 90 days after amendment file date)		
	was/were approved by the shareholders. The number of votes cast for the shareholders was/were sufficient for approval.	
``	was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote mendment(s):	
"The number of	votes cast for the amendment(s) was/were sufficient for approval by	
	(voting group)	
The amendment(s) v and shareholder action	vas/were adopted by the board of directors without shareholder action on was not required.	
The amendment(s) v shareholder action w	was/were adopted by the incorporators without shareholder action and was not required.	
selecte	rector, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
ARII	EL GOITIA	
<u> </u>	(Typed or printed name of person signing)	
Pres	sident	
	(Title of person signing)	

FILING FEE: \$35