

JUN 16 2017

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AMERIAN DISCOUNT PHARMACY CORP.  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000086336

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JASON B. KASTER

(Name of Person)

(Name of Firm/Company)

14703 TRIPLE EAGLE COURT

(Address)

FORT MYERS, FLORIDA 33912

(City/State and Zip Code)

For further information concerning this matter, please call:

JASON B. KASTER

(Name of Person)

at ( 239 ) 821-2555

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

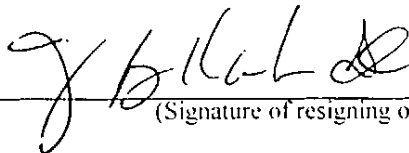
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, JASON B. KASTER, hereby resign as PRESIDENT  
(Title)

of AMERICAN DISCOUNT PHARMACY CORP.  
(Name of Corporation)

P09000086336, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314