(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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of 10/12/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PHARMACY 4U	INC		
DOCUMENT NUM	IBER: P09000100808			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Gaspar Metralha			
		Name of Contact Person	n	
	Pharmacy 4U Inc			
		Firm/ Company		
	777 South Flagler Drive			
	Address			
	WEST PALM BEACH, FLORIDA 33401			
		City/ State and Zip Cod	e	
	pharmacyforyou@outlook.co	m		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
GASPAR METRAL	НА	at (593 7636	
Namo	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State:	
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
M:	ailing Address	Street	Address	

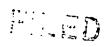
Amendment Section **Division of Corporations** P.O. Box 6327

Tallahassee, FL 32314

Street Address

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 -Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



PHARMACY 4U INC			2022 455
(Name)	of Corporation as current	tly filed with the Florida Dept.	or State A: 125 AH 10: 18
209000100808			99) 72) - 1707e
	(Document Number	of Corporation (if known)	TALL MASSEE, FL
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation ad	opts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation;		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation no	or the abbreviation "Corp.,"
3. Enter new principal office address.	if applicable:	777 South Flagler Drive	
	8. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		ORIDA 33401
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		777 South Flagler Drive	
		WEST PALM BEACH, FLO	ORIDA 33401
D. If amending the registered agent an new registered agent and/or the ne			ne of the
	GASPAR METRALHA		
Name of New Registered Agent			
Name of New Registered Agent	433 PLAZA REAL STE		
Name of New Registered Agent		275 treet address)	
Name of New Registered Agent New Registered Office Address:			Florida 33432

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	ACHANTA, SESHA RAO	433 PLAZA REAL STE 275
Add			BOCA RATON FL 33432
X Remove			
2) Change			
Add			914 PEMBROOK LANE
X Remove 3) Change	T	IPPAGUNTA, VAMSHIDHAR	CHATTANOOGA, TN 37421
X Add			777 South Flagler Drive
Remove			WEST PALM BEACH, FL 33401
4) Change	CEO/P	ROGERIO SCOTTON	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	
	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

• .

The date of each amendment(s) add	option:	, if other than the
date this document was signed.		
04/19 E ffective date <u>if applicable</u>:		
enective date in applicable.	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep		tory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	ted by the incorporators, or board of d	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of ficient for approval.	of votes cast for the amendment(s)
	oved by the shareholders through votinach voting group entitled to vote separ	
"The number of votes cast f	or the amendment(s) was/were sufficie	nt for approval
by ROGERIO SCOTTON		•
oy	(voting group)	
04/19/2022		
Dated	- M	
Signature	XMT	
(By a dir	ector, president or other officer – if dir by an incorporator – if in the hands of	
appointe	d fiduciary by that fiduciary)	
ł	ROGERIO SCOTTON	
-	(Typed or printed name of p	erson signing)
(ЕО/Р	

(Title of person signing)