# P10000052365

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	OF CORPORATION: PAPPY'S DRUGS INC		
DOCUMENT NUM	JMENT NUMBER: P100052365		
The enclosed Articles	of Amendment and fee a	are submitted for filing.	
Please return all corre	spondence concerning thi	is matter to the following:	
		PETER DELTORO	
	N	Name of Contact Person	
	PAI	APPY'S DRUGS INC	
	Firm/ Company		
716 SW SQUIRE JOHNS LANE			
	Address		
	PALM CITY FL 34990		
	C	City/ State and Zip Code	
	PETEDELTO E-mail address: (to be used	FORO@YAHOO.COM  ed for future annual report notification)	
For further information	n concerning this matter,	please call:	
	R DELTORO	•	
	Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	r the following amount m	made payable to the Florida Department of State:	
□ \$35 Filing Fee	☑ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Afldr Affiendment Sc Division of Co P.O. Box 6327 Tallahassee, FI	ection 2000 St. Trailing propertions	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 23, 2011

PETER DELTORO PAPPY'S DRUGS INC. 716 SW SQUIRE JOHNS LANE PALM CITY, FL 34990

SUBJECT: PAPPY'S DRUGS INC. Ref. Number: P10000052365

We have received your document for PAPPY'S DRUGS INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$43.75.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 811A00012674

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www.sunbiz.org

### Articles of Amendment Articles of Incorporation of

FILED

PAPPY	'S DRUGS INC,	17 JUN -6 PH 12: 52
(Name of Corporation as curr	ently filed with the Florid	la Dept. of State CRETARY OF STATE
PAPPY'S DRUGS INC.  (Name of Corporation as currently filed with the Florida Dept. of State CRETARY OF STATE AHASSEE FL		IALLAHASSEE FLORIDA
The state of the s	nber of Corporation (if kno	own)
·	• `	,
mendment(s) to its Articles of Incorporation:	o, Florida Statutes, this F	Clorida Profit Corporation adopts the following
. If amending name, enter the new name o	f the corporation:	
		The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	designation "Corp," "Inc	c," or "Co". A professional corporation
3. Enter new principal office address, if app		
Principal office address <u>MUST BE A STREE</u>	<u>TADDRESS</u> )	
C. Enter new mailing address, if applicable	•	
(Mailing address MAY BE A POST OFFI		
		·
<ul> <li>If amending the registered agent and/or r new registered agent and/or the new registered.</li> </ul>		n Florida, enter the name of the
new registered agent and/or the new regis	stered office address:	
Name of New Registered Agent:	<del></del>	
New Registered Office Address:	(Florida street d	address)
		re-ula-
	(City)	, Florida (Zip Code)
	(0.3)	(Esp cour)
ew Registered Agent's Signature, if changing		
hereby accept the appointment as registered a	gent. I am familiar with a	and accept the obligations of the position.
	_	
	ignature of New Registered	d 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>D</u>	JACLYN RUBINO UHL	3261 SW PORPOISE CIRCLE PALM CITY FL 34990	_ ☐ Add _ ☑ Remove
·			_ □ Add □ Remove
(anach ac	lditional sheets, if necessary). (Be sp	ecific)	
		· ·	
provisio	nendment provides for an exchange, sons for implementing the amendment of applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: JANUARY 1, 2010
Effective date if applicable:	(date of adoption is required)
	(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(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement and 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/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated MAY	<u>′ 15, 2011</u>
Signature	(XXX)M
sele	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 ointed fiduciary by that fiduciary)
	PETER DELTORO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)