## P11000043666

| (Re                     | questor's Name)   |             |
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| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | me)         |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
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ELECTE TARY OF STATE DIVISION OF CORPORATIONS

Amund CC 103/15/12

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: _  | LITTLE                   | FAMILY  | PHARMACY   | Corp.               |
|---|--------------------------|---|--|---------------------|
| DOCUMENT NUMBER:  | P110000                  | 63666   |  |                     |
| The enclosed Articles of Amenda   | nent and fee are submi   | tted for filing.  |  |                     |
| Please return all correspondence c  | oncerning this matter    | to the following:   |  |                     |
|   | <u> </u>                 | ANET V  | MORALES<br>Person  |                     |
|   | L.TTL.                   | E FAMILY  | PHARMACY   | CORP                |
|   | 220                      | SU SU<br>Address  | PHAKMACY<br>1y<br>16 th ST. ST   | <u> 116</u>         |
|   |                          |   | 33145<br>Code  |                     |
| F-mai   | little Fo                | imilyphac   | macy e yahoo eport notification)   | .com                |
| For further information concerning  | g this matter, please ca | all:  |  |                     |
| YANET N   | ORALÉS<br>Person         | at (_ <u>78</u>   | ea Code & Daytime Tele   | C 485               |
| Enclosed is a check for the follow  |                          |   |  | p.10.10 1. 10.11001 |
|   | ificate of Status        | \$43.75 Filing Fee<br>Certified Copy<br>(Additional copy<br>enclosed) | Certificate of S   | Status<br>,         |
| Mailing Addre<br>Amendment Sec<br>Division of Cor<br>P.O. Box 6327<br>Tallahassee, FL | ction<br>porations       | A<br>D<br>C<br>26   | treet Address<br>mendment Section<br>ivision of Corporations<br>lifton Building<br>561 Executive Center Ciallahassee, FL 32301 | rcle                |

## Articles of Amendment to Articles of Incorporation

of

| LITTLE FAMILY PHARMACY CORA  |                          |
|--|--------------------------|
| (Name of Corporation as currently filed with the Florida Dept. of State)   |                          |
| P110000 63666  |                          |
| (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 its Articles of Incorporation:   | amendment(s) to          |
| A. If amending name, enter the new name of the corporation:  |                          |
|  | The new                  |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co" or the designation "Corp." "Inc," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A." | previation<br>ontain the |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |                          |
|  |                          |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  | 9                        |
|  | TZ HAR 14 B              |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  | CONTROL ST               |
| Name of New Registered Agent YANET MORALES   | O THE                    |
| (Florida street address)   | <i>₹</i>                 |
| New Registered Office Address: WIN MI . Florida 33,45 (City) (Zip Code)  |                          |
| (City) (Zip Code)  |                          |
| New Registered Agent's Shinature, il changing Registered Agent:  |                          |
| I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  |                          |
| Signature of New Registered 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)

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.

| Example: X Change             | <u>79</u>   | John Doe      |   |
|-------------------------------|-------------|---------------|---|
| X Remove                      | <u>v</u>    | Mike Jones    |   |
| X Add                         | <u>SV</u>   | Sally Smith   |   |
| Type of Action<br>(Check One) | Title       | . <u>Name</u> | <u>Address</u>                                |
| 1) Change<br>Add<br>Remove    | D           | Lisney Bayon  | 1051 SW 2 ST.<br>MIAMI FL 33130               |
| 2) Change Add Remove          |             | YHWET MOLAL   | 2200 SW 16th ST<br>57E 116<br>_MIRMI FL 33145 |
| 3 ) Change<br>Add<br>Remove   | <del></del> |               |   |
| 4) Change<br>Add<br>Remove    | <del></del> |               |   |
| 5) Change<br>Add<br>Remove    | <del></del> |               |   |
| 6) Change<br>Add<br>Remove    | <del></del> |               |   |

| N/W                 | ng additional Articles, enter change(s) here: eets, if necessary). (Be specific)   |
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| f an amendment pr   | ovides for an exchange, reclassification, or cancellation of issued shares,        |
| provisions for impl | ementing the amendment if not contained in the amendment itself:                   |
| provisions for impl | ementing the amendment if not contained in the amendment itself: le, indicate N/A) |
| provisions for impl | ementing the amendment if not contained in the amendment itself:                   |
| provisions for impl | ementing the amendment if not contained in the amendment itself: le, indicate N/A) |
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| provisions for impl | ementing the amendment if not contained in the amendment itself: le, indicate N/A) |

| he date of each amendment(s) adoption:  | MARCH 8th ZOIZ  |
|---|---|
|   | MARCH 8th 2012  |
|   | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)  | (CHECK ONE)   |
| ·   | the shareholders. The number of votes cast for the amendment(s) for approval.   |
|   | y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s): |
| "The number of votes cast for the a   | mendment(s) was/were sufficient for approval  |
| by  |   |
|   | (voting group)  |
| action was not required.  The amendment(s) was/were adopted by action was not required. | the incorporators without shareholder action and shareholder  |
| ◆ Dated MA  | 1RCH 812 2012   |
| Signature   | president or other officer – if directors or officers have not been   |
|   | incorporator - if in the hands of a receiver, trustee, or other court ciary by that fiduciary)                                |
| a   | (Typed or printed name of person signing)   |
|   | (Typed or printed name of persen signing)   |
|   | DIRECTOR  |
|   | (Title of person signing)   |