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JAN 31 2014

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations			
NAME OF CORPORATION: Sent	trix Pharma	cy and l	Discount Inc
DOCUMENT NUMBER: P1100			
The enclosed Articles of Amendment and		filing.	<u> </u>
Please return all correspondence concerni	ng this matter to the fo	llowing:	
Spencer .	I. Malkin		
<u></u>		Contact Person	· · · · · · · · · · · · · · · · · · ·
	Firm	ı/ Company	
2901 Clin	t Moore Ro	ad	
D D-4		Address	
Boca Hate	on, FL 3349		
•	·	te and Zip Code	
SpencerM@			
E-mail address	s: (to be used for future	e annuai report i	notification)
For further information concerning this ma	atter, please call:		
Lynn Swanson	,	, 954	, 299-0699
Name of Contact Person		Area Coo	299-0699 de & Daytime Telephone Number
Enclosed is a check for the following amo	ount made payable to th	ne Florida Depar	rtment of State:
□ \$35 Filing Fee □\$43.75 Filin Certificate o	Status Certifie	onal copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	ıs	Amendi Division Clifton 2661 Ex	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

FILED

Articles of Amendment to **Articles of Incorporation** 14 JAN 28 PH 4:59

Sentrix Pharmacy and Discount Inc

ient(s) to

(Name of Corporation a	s currently filed with the Flo	orida Dept. of State)	
P11000098532			
(Docume	nt Number of Corporation (if	known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation	adopts the following amendn
A. If amending name, enter the new n	ame of the corporation:		
N/A			The ne
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or "C	o". A professional corpo P.A."	oorated" or the abbreviatio
B. Enter new principal office address,		N/A	
(Principal office address MUST BE A S	STREET ADDRESS)		
C. Enter new mailing address, if applicable:		2901 Clint Moore	e Road
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	C.::to 047	
		Suite 247	
		Boca Raton, FL	33496
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office addre w registered office address:	ss in Florida, enter the na	me of the
Name of New Registered Agent	Spencer J. Malkin		
Hame of Her Registered rigers	2901 Clint Moore	Road, Suite 247	-
	(Florida stree	et address)	_
New Registered Office Address:	Boca Raton	, Florid	33496
	(City)	· · · · · · · · · · · · · · · · · · ·	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regis	tered gent. I am familiar wi	th and accept the obligation	ns of the position.
	1600 A	M	_
Si	gnature of New Registered As	gent, 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	PT Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	Mildrey Ova	6910 Stirling Road
Add			Hollywood, FL 33024
Remove			
2) Change	<u>D</u>	Aldrick Gonzalez	6910 Stirling Road
Add			Hollywood, FL 33024
Remove			
3) Change	PD	Spencer J. Malkin	2901 Clint Moore Road
Add			Suite 247
Remove			Boca Raton, FL 33496
4) Change	TSD	Alex Chervinsky	2478 McDonald Road
Add			Brooklyn, NY 11223
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) I/A	(Attach add	tional sheets, if necessary).	(Be specific)			
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	(if not	nor implementing the ame	nament ii not contaii	ned in the amendm	ent itseit:	
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	-	· · · · · · · · · · · · · · · · · · ·				
						

The date of each amendment(s) adoption: N/A	, if other than the
date this document was signed.	 /
Effective date if applicable: N/A	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated January 13, 2014	
Signature	
(By a director, product or other officer – it directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiductary by that tiductary)	
Spencer J. Malkin	
(Typed or printed name of person signing)	_
President and Director	
(Title of person signing)	_