P12000003096

| (Re | questor's Name) | |
|-------------------------|------------------|-------------|
| . (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Na | me) |
| | | |
| (Do | cument Number) |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



500260555535

05/27/14--01050--012 **35.00

14 MAY 27 PHI2: 45

Amend 10,14

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: Rx Pro Pha | irmacy & Compo | ounding, Inc. |
|--|---|--|--|
| DOCUMENT NUMB | ER: P1200000369 | 6 | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this mat | tter to the following: | |
| | Mark W. Prewitt | | |
| • | | Name of Contact Persor | 1 |
| | Rx Pro | | |
| • | | Firm/ Company | |
| | 1485 Livingston L | ane | |
| • | | Address | |
| | Jackson, MS 392 | 13 | |
| | - 1 | City/ State and Zip Code | e |
| mni | rewitt@worldhealt | thind com | |
| | | sed for future annual report | notification) |
| | 2 | and to rather united toport | |
| For further information | concerning this matter, pleas | se call: | |
| Mark W. Prev | vitt | at (601 | , 326-7353 |
| Name o | of Contact Person | | de & Daytime Telephone Number |
| Enclosed is a check for | r the following amount made | payable to the Florida Depa | artment of State: |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| | ling Address | Street | Address |
| Amendment Section | | Amendment Section | |
| Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 Tallahassee, FL 32314 | | Clifton Building 2661 Executive Center Circle | |
| i alialiassee, i L 323 (4 | | Tailahassee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the F | lorida Dept. of State) | |
|--|---|---|
| (Document Number of Corporation (i | f known) | _ |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Florida Profit Corporation adopts the followi | ng amendment(s) t |
| A. If amending name, enter the new name of the corporation: | | |
| N/A | | The new |
| name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation ' | Co". A professional corporation name must | bbreviation |
| word chartered, projessional association, or the appreviation | <i>P.A.</i> N/A | 7 |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 1V/A | 14 HAY 27 PH 12: 15 |
| | | – Ľ _: |
| | | - = |
| C. Enter new mailing address, if applicable: | N/A | 1:57 |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | _ = = = = = = = = = = = = = = = = = = = |
| | | _ |
| | | |
| D. If amending the registered agent and/or registered office add | ress in Florida, enter the name of the | |
| new registered agent and/or the new registered office address | | |
| Name of New Registered Agent N/A | | |
| The state of the s | | |
| (Florida str | reet address) | |
| New Registered Office Address: N/A | , Florida N/A | |
| New Registerea Office Address: (City) | , Florida(Zip Code) | |
| | | |
| | | |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar | | |
| . norvey weeeps the appointment as regime, ea agent. I am junitud | and accept the congunions 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.

| 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> | Name | <u>Addres</u> s |
| i) Change | S | James Bennett | 1485 Livingston Lane |
| Add | | | Jackson, MS 39213 |
| Remove | | | |
| 2) Change | STD | Christopher Merriwether | 1485 Livingston Lane |
| Add | | | Jackson, MS 39213 |
| Remove | | | |
| 3) Change | PD | Jason Rutland | 1485 Livingston Lane |
| Add | | | Jackson, MS 39213 |
| Remove | | | |
| [] | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | - |
| Remove | | | |
| | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| (Attach additional sheets, if necessary). | <u>cles, enter change(s) here</u> : (Be specific) |
|--|---|
| /A | |
| ···· | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| | |
| | |
| | |
| | |
| If an amount amount and the fact and and the second | |
| provisions for implementing the ame | nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself: |
| (1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| (if not applicable, indicate N/A) | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| (if not applicable, indicate N/A) | |

| | adoption: January 2, 2015 | , if other than the |
|---|--|---------------------|
| date this document was signed. | 0.0040 | |
| Effective date <u>if applicable</u> : | anuary 2, 2013 | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were aby the shareholders was/were | adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes ca | ast for the amendment(s) was/were sufficient for approval | |
| by | ,, | |
| | (voting group) | |
| The amendment(s) was/were action was not required. | adopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were action was not required. | adopted by the incorporators without shareholder action and shareholder | |
| Dated | 15/14 | |
| Signature C | | |
| (By | a director, president or other officer - if directors or officers have not been | · · · · · · |
| | cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary) | |
| | Christopher Merriwether | |
| | (Typed or printed name of person signing) | · |
| | Director | |
| | (Title of person signing) | |