## Florida Department of State

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN SUNRISE RX PHARMACY, INC.

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Corporate Filing Menu

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C. GOLDEN

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## Articles of Amendment to Articles of Incorporation

	E RX PHARMACY, INC. as entrently filed with the Florida Dept. of State)
. (Name of Corporation:	as currently filed with the Florida Dept, of State)
	P12000006800
(Досинен	Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida St s Articles of Incorporation:	atutes, this Plorida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corp.	oratlou:
SUNRISE RX STAFFING INC	The nav
ame must be distinguishable and contain the word "Corp" "Inc" or Co.," or the designation "Corp," or d'chartered, ""professional association," or the abi	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation rame must contain the breviation "P.A."
3. <u>Enter new principal office address, if applicable;</u> Principal office address <u>MUST BE A STRBBT ADDRI</u>	ESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BIL A POST OFFICE BOX</u> )	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
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(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered new registered agent and/or the new registered of	office address in Figrida, enter the name of the fice address:
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered new registered agent and/or the new registered of	office address in Flyrids, cuter the name of the
(Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered new registered agent and/or the new registered of	office address in Figrida, enter the name of the fice address:
(Mailing address MAY BE A POST OFFICE BOX)  ). If amending the registered agent and/or registered new registered agent and/or the new registered of	office address in Florida, cuter the name of the fice address:

If amending the Officers address of each Officer (Attach additional sheets, Please note the officer/dispersional President, V= Vice Executive Officer, CFO sheld. President, Treasure Changes should be noted a changa, Mike Jones laa Mike Jones, V as Remove	und/or D if necess rector titl Presidem - Chief I r, Directu in the fo	trector bet ary) is by the first; T= Treas Financial Cor would be flowing ma corporation,	ng added:  it letter of the inrer; S= Seci officer. If an it PTD. inner, Curren Sally Smith i	office title: retary; D= Dir. officer/director	ector; TR= 1 holds more	Trustee; C = Cha than one title, his PST and Mike Jo	irman or Clerk; CEO = it the first letter of each oves is listed as the Y. Th	Chief office nere is
Example: X_Change	<u>PT</u>	John Doc				•		
X Remove	<u>v</u>	Mike Jon	<u>es</u>					
X Add	SY	Salty Sm	ith				ı	
Type of Action (Check One)	Title	:	Name			<u>Addres</u> s		
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f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
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(if not applicable, indicate NA)		
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
	. In all the death
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	Ke Mill hot be tizten as m
Adoption of Amendment(s) (CHECK ONE)	
If The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amandment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by (woling group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other consequently appointed fiduciary by that fiduciary)	n urt
ELIER GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	