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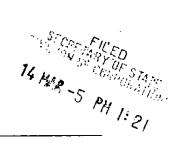
Amend 103/4/4

COVER LETTER

. TO: Amendment Section
Division of Corporations

NAME OF CORPOR		·	PHARMACY INC	
DOCUMENT NUMB	ER: P1200006369	2		
	of Amendment and fee are sub			
Please return all corres	pondence concerning this mate	ter to the following:		
	VIRAL, PATEL			
•		Name of Contact Person		
		Firm/ Company		
_	20011 PERGOLA	BEND LANE		
	TAMPA, FL 3364	Address 7		
		City/ State and Zip Code	•	
- 				
	E-mail address: (to be us	ed for future annual report	notification)	
For further information	n concerning this matter, pleas	e call:		
VIRAL, PATE	EL	_{at (} 201	892 1968	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department 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)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment Articles of Incorporation of



CLERMONT COMMUNITY PHARMACY INC

(Name of Corporation as currently filed with the Florida Dept. of State)

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P 1	20	oo	NR	З'n	Y)

(Document Number of Cornoration (if known)

idment(s) to

A. If amending name, enter the new name of th	corporation:
N/A	The
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	word "corporation," "company," or "incorporated" or the abbrev. orp," "Inc," or "Co". A professional corporation name must conta- the abbreviation "P.A."
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET A	
(rrincipal office address <u>MOST BE A STREET A</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	N/A
	stered office address in Florida, enter the name of the
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered Name of New Registered Agent	
new registered agent and/or the new registe	
new registered agent and/or the new registe	(Florida street address)
Name of New Registered Agent Note: Name of New Registered Agent	(Florida street address)
Name of New Registered Agent Name of New Registered Agent	(Florida street address)

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>PT</u>	John Doc		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	D	NIRAJ AMIN	1052 LASCALA DR	
Add			WINDERMERE, FL 34786	
Remove				
2) Change	D	KUNTIE KOWLESSAR	2065 NEWTOWN RD	
Add			GROVELAND, FL 34736	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	J			
Add				
Remove				

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an amendment provides for an exchar rovisions for implementing the amend	ge, reclassification, o ment if not contained	in the amendment itsel	snares,
(if not applicable, indicate N/A)			
			

The date of each amendment(s) ad	option: 01/01/2014	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast t	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	2/01/2014 Offer	
Signature	1 Lew Haln	
(By a di	rector, president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
.,	NUDAL DATE	
	VIRAL PATEL	
	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	