## P12000072563

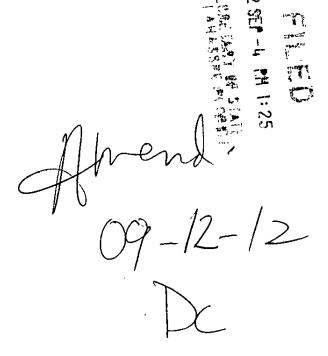
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PICK-UP	WAIT	MAIL
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## COVER LETTER

TO: Amendment Section Division of Corporations:
NAME OF CORPORATION: ISHQ RX SOLUTIONS INC
DOCUMENT NUMBER: P12000072563
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
AMY PATEL Name of Contact Person
Name of Contact Person  ZSHA RX SoLutions INC  Firm/Company
Firm/ Company
100 NE 25 57 13 63
700 NE 25 57 15 03  Address  MIAMI FL 33173  City/ State and Zip Code
City/ State and Zip Code
E-mail address; (to be used for future annual report notification)
For further information concerning this matter, please call:
AM DATEL at (786) 288-1732  Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations Clifton Building Tallahassee, FL 32314  Z661 Executive Center Circle Tallahassee, FL 32301

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	Articles of Amenda	nent]			· yA
·	to Articles of Incorpora	ation			
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ISHQ RX S	obutions	Inc		ار م	
(Name of Corporation as curren	itly filed with the Florida	Dept. of State)			7 LT.
P12000072563			·	·	2
(Document Numb	er of Corporation (if know	iu)			170
rsuant to the provisions of section 607,1006; F Articles of Incorporation:	lorida Statutes, this Florida	u Profit Corport	ation adopts the	ie föllowing	amendme
If amending name, enter the new name of	he corporation:				
<u></u>	· · ·				The new
ord "chartered," "professional association," o	or the abbreviation P.A."				
rd "chartered," "professional association;" of Enter new principal office address, if appli	r the abbreviation "P.A."				
rd "chartered," "professional association;" o <u>Enter new principal affice address, if appli</u> rincipal office address <u>MUST BE A STREET</u>	r the abbreviation "P.A." <u>cable:</u> <u>ADDRESS</u> )				
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rd "chartered," "professional association," of Enter new principal office address, if application of the address of the addres	r the abbreviation 'P.A."  cable: ADDRESS')  E BOX)	Florida, enter	the name of t	hie	
Enter new principal office address, if application, and application of the address of the addres	r the abbreviation 'P.A."  cable: ADDRESS')  E BOX)		the name of t	he	
If amending the registered agent and/or re new registered agent and/or the new regist	r the abbreviation P.A."    Cable: ADDRESS      EBOX      distered office address in ered office address:	ress) _	Florida	he Code)	

Page 1 of 4

Signature of Naw Registered Agent, if changing

(Attach additional sheats, 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 Salty Smith, SV as an Add. Example:  $\mathbf{PT}$ John Doe X Change Ÿ X Remove Mike Jones X Add. Sally Smith Title Name <u>Address</u> Type of Action (Check One) PATEL 1309 EALLEGRIE DR i) 🔀 Change INVERNESS FL Add 34453 Remove Change. Add \_\_\_ Remôye 3) \_\_\_\_ Change Add Remove 4) Change Ådd Remove 5) \_\_\_\_ Chango: \_\_\_ Add \_ Remove 6) \_\_\_\_ Change Ádd

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:

Remove

Page 2 of 4

VONE	ets, if necessary). (B				
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<u>an amendment pr</u> revisions for impl	ovides for an exchang ementing the amenda	<u>e, reclassification</u>	on, or cancellatio	n of issued shares. idment itself:	1
(if not applicabl	e, indicate N/A)				
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The date of each amendme	mt(s) adoption: $8-28-20/2$
Effective date if applicable	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
The amendment(s) was/w must be separately provi	gere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(\$):
"The number of vot	les cast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/w action was not required.	vere adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/w action was not required.	vere adopted by the incorporators without shareholder action and shareholder
Dated	8/98/13
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 court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)