Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000232331 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I2000000019 Phone : (305)552-5973 : (305)220-1440 Fax Number

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN SAN NICOLAS PHARMACY CORP

VED	AM 8:403	SPURATIONS FLELORIDA
RECEI	8 OCT 18	15.00 (CAC) 15.00 (OF COR 11. AHASSEF
		- 12

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing Menu

08/30/2031 05:04 UCI-18-2013 FRI 12:04 PM

CAPITAL ONE HEALT

FAX No. 305 4776518

13 00T 18 AM 9: 10

SECRETARY OF STATE TALL AHASSEE, FLORIDA

H13000232331

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF

PIBOOOLIAIZ

(PRESENT NAME OF CORPORATION)

Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

Directors shall now read as follows:

ADD: TOMAS CHARCIA (FREE)

ZI40 W. FLAGIER ST.

SUITE 10Z

MIAMI, +2 33135-5600

DEETE: ROSA LOPEZ

ZI40 W. FLAGIER ST.

SUITE 10Z

SUITE 10Z

New Registered Agent

TOMAS GARCIA COT. ZIAO W. FLAGIER COT. SUITE 102 MIAMI, FL 33135- 5600

SECOND: 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, are as follows.

TOMAS GARGIA 10090 SHAPES

H13000232337

08/30/2031 05:05 DCT-18-2013 FR1 12:04 PM

CAPITAL ONE HEALT

FAX No. 305 4776518

13 OCT 18 AM 9: 10

H13000232331.

SECRETARY OF STATE TALLAHASSEE FLORIDA

THIRD: The date of each amendment's adoption:
. FOURTH: Adoption of Amendment(s) (check one)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups.
The following statement must be separately for each voting group entitled to vote separately on each amendment(s):
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.
Signed this 11th day of COBER 2013.
Signature /omoo
Signature (By the Chairman or Vice Chairman of the directors,
President or officer if adopted by the shareholders)
OR .
(By a director if adopted by the directors) OR
(By an incorporator if adopted by the incorporators)
TOMAS GRECIA Typed or printed name
Typed or printed name
TRESIDENT

Having been named as registered agent and to accept service of process for the stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity.

Registered Agent Signature

H1300023235T