P14000055735

(R	equestor's Name)		
(A	ddress)		
(A	ddress)		
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name)	;	
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
		1	

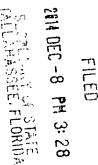




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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: REAL PHA	RMACY & DISC	COUNT, INC
DOCUMENT NUMB	_{ER:} P1400005573	5	
	of Amendment and fee are su		
Please return all corresp	condence concerning this ma	tter to the following:	
	HECTOR CANO		
-		Name of Contact Person	1
-		Firm/ Company	
-	1726 NW 36 ST		
	MIAHI, FL	Address 33142	
-	1.7.21.	City/ State and Zip Code	2
	E-mail address; (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
		at (_)
Name o	f Contact Person	Area Co)de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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 Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

REAL PHARMACY & DI	SCOUNT, INC		2814 DEC -8	PM 3: 28
· · · · · · · · · · · · · · · · · · ·	currently filed with the Flor	ida Dept. of State)	TALLAHASSE	OF STATE
P14000055735	_		TÄLLÄHÄSSE	E. FLUKIUM
(Documen	t Number of Corporation (if k	nown)	10.2	•
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Flo	orida Profit Corporation ado	pts the following a	mendment(s) to
A. If amending name, enter the new na	me of the corporation:			
N/A			TY	ne new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associates. B. Enter new principal office address, (Principal office address MUST BE A S.	ation "Corp," "Inc," or "Co tion," or the abbreviation "P if applicable:	o". A professional corporati	ated" or the abbr on name must con	eviation ttain the
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A		
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the name	of the	
Name of New Registered Agent				
	1726 NW 36 ST SUITE			
	(Florida street	(address)		
New Registered Office Address:	(City)	, Florida	Cin Code	
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist	ered agent. I am familiar wil	п ина ассері іпе обиданопѕ	ој те роѕшоп.	

Page 1 of 4

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	HECTOR CANO	1726 NW 36 ST SUITE #10
Add			MIAMI, FL 33142
Remove			
2) Change	Р	REY F MARTINEZ	1726 NW 36 ST SUITE #10
Add			MIAMI, FL 33142
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	<u>ticles, enter change(s) here</u> : (Be specific)
I/A	, (== speeg.e,
	
, , , , , , , , , , , , , , , , , , , ,	
. If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am-	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

ine date of each amendment(s) adoption:	, it other than th
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file a	ate)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendates.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action ar action was not required.	nd shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sh action was not required.	areholder
Dated_12/2/2014	
Signature / Luton Common. (By a director, president or other officer – if directors or officers have	
(By a director, president or other officer – if directors or officers has selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	or other court
HECTOR CANO	
(Typed or printed name of person signing	3)
PRESIDENT	
(Title of person signing)	