P14000063913

(R	equestor's Name)			
(Address)				
(A	ddress)			
(C	ity/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE OF WISHER OF CORPORATIONS

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GIO PHARMACY & DISCOUNT CORP.				
DOCUMENT NUMBER: P14000063913				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
ARASAY BARRUETA				
Name of Contact Person				
GIO PHARMACY & DISCOUNT CORP.				
Firm/ Company				
13409 SW 17 TERRACE CIR N				
Address				
MIAMI, FL , 33175				
City/ State and Zip Code				
GIOPHARMACY@HOTMAIL.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
ARASAY BARRUETA at (305) 3311028				
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:

□\$43.75 Filing Fee &

Certificate of Status

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

Certified Copy (Additional Copy

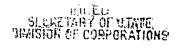
is enclosed)

Certificate of Status



■ \$35 Filing Fee

Articles of Amendment to Articles of Incorporation



GIO PHARMACY & DISCOUNT CORP.

14 SEP 30 PM 12: 42

(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P14000063913	
(Document Number of Corporation (if I	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	dorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2422 SW 8TH ST
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI FL 33135
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2422 SW 8TH ST
	MIAMI FL 33135
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ss in Florida, enter the name of the
(Florida stree	et address)
New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with signature of New Registered Agent.	

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 Do	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		···-		
Add				
Remove				
_				
6) Change		<u> </u>		
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
	<u> </u>			
If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:			
(if not applicable, indicate N/A)				

	na. Na 1914 TAR).U 7 OF AWATE					
The date of each amendment(s) adoption: 09/17/2014 date this document was signed.	JEANNER OF C	ARPORATIONS	, if other than the				
Effective date if applicable: 09/17/2014	14 SEP 30	PM 12: 42					
(no more than 90 days after amendment file date)							
Adoption of Amendment(s) (CHECK ONE)							
The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for	the amendment(s)					
The amendment(s) was/were approved by the shareholders thromust be separately provided for each voting group entitled to							
"The number of votes cast for the amendment(s) was/wer	e sufficient for approval						
_{by} 100%	,	•					
(voting group)							
The amendment(s) was/were adopted by the board of directors action was not required.	without shareholder action	n and shareholder					
The amendment(s) was/were adopted by the incorporators with action was not required.	out shareholder action an	d shareholder					
Dated 09/17/2014							
Signature Aras	say Barrue						
(By a director, president or other office selected, by an incorporator — if in the appointed fiduciary by that fiduciary)	e hands of a receiver, trus						
ARASAY BARRUETA							
(Typed or p	printed name of person sig	ning)					
PRESIDENT							
(Ti	tle of person signing)						