P14000066806

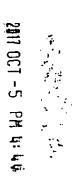
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies		
Special Instructions to I	Filing Officer:	

Office Use Only



400304024124

10/05/17--01002--014 ••35.00



OCT 00 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: US HWY 1	PHARMACY IN	NC
	R: P1400006680		
	Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
L	.UIS BENITEZ		
-		Name of Contact Perso	n
_		Firm/ Company	
	609 SW 67 Ave		
		Address	-
1	<u>//IAMI, FL 33155</u>	j	
		City/ State and Zip Coo	le
INFO	D@ACCOUNTIN		
	E-mail address: (to be us	sed for future annual repor	t notification)
For further information of	concerning this matter, pleas	se call:	
LUIS BENITE	Z	,786	312 2797 Dide & Daytime Telephone Number
Name of	Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment 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)
Ameno Divisio P.O. B	ig Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amen Divisi Cliftor	Address dment Section on of Corporations on Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with t P1400066806	the Florida Dept. of State)	
(Document Number of Corporati	on (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation:		
A. If amending name, enter the new name of the corporation	<u>1:</u>	
N/A		
name must be distinguishable and contain the word "corpoi "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corporation name must e	
B. Enter new principal office address, if applicable:	1609 SW 67 Ave	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI FL 33155	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1609 SW 67 Ave	
(Mauing address MAT BE, A POST OFFICE BOX)	541554 EL 00455	
	MIAMI FL 33155	
	MIAMI FL 33155	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade Name of New Registered Agent	address in Florida, enter the name of the	
<u>Name of New Registered Agent</u>	address in Florida, enter the name of the	
Name of New Registered Agent (Florid New Registered Office Address):	address in Florida, enter the name of the Iress:	

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)	Title	Name	<u>Addres</u> s
1) Change	<u>T</u>	MISLEIDYS GONZALEZ	6465 OVERSEAS HIGHW
Add			PLAZA DEL MAR
Remove			MARATHON FL 33050-27
2) Change			
Add			
3) Change	·=		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artic	cles, enter change(s) here:	
(Attach additional sheets, if necessary).	(Be specific)	
N/A		
		
···		_
		
•	· · · · · · · · · · · · · · · · · · ·	
		<u> </u>
······································	<u> </u>	
F. If an amendment provides for an excha	inge, reclassification, or c	ancellation of issued shares,
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in	the amendment itself:
N/A		
		
	<u></u>	
		 -

The date of each amendment(s) adoption:	, 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 adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for 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.	
Dated 09/28/2017	
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)	_
LUIS BENITEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_

. . . .