## P15000007360

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: \_\_\_\_ Pharmacy of Tampa DOCUMENT NUMBER: \_\_P1500007360 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Monika Masout Name of Contact Person Pharmacy of Tampa
Firm/ Company 4433 Gunn Hwy
Address Tarupa, F1 33618-8713 City/ State and Zip Code monikamasoud@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Monika Mosoup at ( 727 ) 600 - 6167

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 & □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address

Amendment Section
Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



August 25, 2017

MONIKA MASOUD PHARMACY OF TAMPA, INC. 4433 GUNN HWY TAMPA, FL 33628-8713

SUBJECT: PHARMACY OF TAMPA, INC.

Ref. Number: P15000007360

We have received your document for PHARMACY OF TAMPA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 317A00017583

Irene Albritton Regulatory Specialist II

www.sunbiz.org

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## Articles of Amendment to Articles of Incorporation

of

Pharmacy of	Tanya, Inc.			
(Name of	Corporation as currently filed with	h the Florida Dept, of State	)	
P1500000 73		····		
	(Document Number of Corporation	on (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the	following amendr	nent(s) to
A. If amending name, enter the new name	e of the corporation:			
			The ne	?W'
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat, word "chartered," "professional associatio	ion "Corp," "Inc," or "Co" A pr	any," or "incorporated" o ofessional corporation nam	r the abbreviation	on
B. Enter new principal office address, if (Principal office address MUST BE A STR				
				-55
		*	734	
C. Enter new mailing address, if applica	ble:		<u>∑</u> 2	
(Mailing address MAY BE A POST OF			.;J 	
			<u></u>	
			بر. م	22
D. If amending the registered agent and/ new registered agent and/or the new i		ida, enter the name of the		
Name of New Registered Agent _	Monika Masout			
	7510 chapel Ave			
_	(Florida street address)			
New Registered Office Address:	Port Richey	, Florida	34668	
	(City)	· · · · · · · · · · · · · · · · · · ·	(Zip Code)	•
New Registered Agent's Signature, if cha I hereby accept the appointment as registered	nging Registered Agent: ed agent. I am familiar with and ac	cept the obligations of the po	osition.	
. , , , , , , , , , , , , , , , , , , ,	•			
. 44	ronita Masoul			
	Signature of New Registered A	Igent, 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
Changes should be noted in the joilowing manner. Currency John Pole is said at a first and make some as finded as the poly of
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>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	Monika Masoud	4433 Gunn Hwy
_✓_ Add			Tampa, F1 33618
Remove			
2) Change	_ P	Kirollos M. Attalla	4433 Gunn Hwy
Add			Tampa, F1 33618
Remove			
3 ) Change	<u> </u>	Michael S. Azer	4433 Gunri Hwy
Add			Tampa, F1 33618
✓_ Remove			
4) Change	_ P	magdi Bishara	4433 Gunn Hwy
Add		J	Tampa, F1 33618
Remove			
5) Change			
Add			
Remove			
- Kemore			
6) Change			
Add			
Remove			

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TV IV	
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The date of each amendm	ent(s) adoption:, if other than the
date this document was sign	ed. ·
Effective date if applicabl	(no more than 90 days after amendment file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted document's effective date of	in this block does not meet the applicable statutory filing requirements, this date will not be listed as the name that the Department of State's records.
Adoption of Amendment(	( <u>CHECK QNE</u> )
☐ The amendment(s) was/ by the shareholders was	vere adopted by the shareholders. The number of votes east for the amendment(s) /were sufficient for approval.
☐ The amendment(s) was/ must be separately prov	vere approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s):
	ites cast for the amendment(s) was/were sufficient for approval
by	
o,	(voting group)
/	were adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/action was not required.	were adopted by the incorporators without shareholder action and shareholder
	8/14/17
Signatur	monita maraul
S.g.m.m.	(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)
	Monika Masoud
	(Typed or printed name of person signing)
	President lownex
	(Title of person signing)