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R. W.



COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: ROPS. Pharmacy Inc
DOCUMENT NUMBER: P1600002648
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christine Paulak
Name of Contact Person
RX Licensing + Hared.
108 L' Pora! Plub DR
Address FORM: Springs FL 33C71 City/ State and Zip Code
City/ State and Zip Code
Christian Champed Champed Company Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christine Pawlak a 561, 215 5067
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:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

FILED

Articles of Incorporation

17 AUG 18 AH 10: 40

R'S Pharmac	Y Incettion い語
	filed with the Florida Dept. of State)
<u> </u>	<u>8 </u>
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
NA	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 "Inc.," or the abbreviation of the abbreviati	2o". A professional corporation name must contain the
D. If amending the registered agent and/or registered office address: Name of New Registered Agent 3981 Coop (Florida sive) New Registered Office Address:	selone Jum Cie.
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Re	cith and accept the obligations of the position. Legistered 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.

Example: X Change	<u>PT</u>	John Doe					
X Remove	\underline{V}	Mike Jones					
X Add	<u>sv</u>	Sally Smith					
Type of Action (Check One)	Title	<u>Name</u>			Address		
1) Change	DP	- Patr	-icia/Alv	manzar	Zlobol Ri	verside	De
Add					#3		
K Remove					Coral Spr	ings Fl3	306
2) Change	De.	Car	los Be	elone	Cord Spr 3987 C		Cir
<u></u> ★ Add					Coconut		•
Remove					330	063	
3) Change							
Add							
Remove							
4) Change							
Add							
Remove							
5) Change							
Add							
Remove							
6) Change		_	<u>.</u>				
Add							
Remove							

f amending or adding additional Articles, enter of Attach additional sheets, if necessary). (Be specified)	fic)
	. 1 / 1
	N/A
	<u> </u>
f an amendment provides for an exchange, recla	ssification, or cancellation of issued shares,
provisions for implementing the amendment if n (if not applicable, indicate N/A)	not contained in the amendment itsett:
(2)	N/A.
	1 17
	<u> </u>

The date of each amendment(s) adoption:	, if other than the
late this document was signed. Effective date if applicable: Filther 1, 2017	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	
(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)	
Coard Belone	
(Typed or printed name of person signing)	
MANAGING Director	,
(Title of person signing)	