P1700007831

(R	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
···	ty/State/Zip/Phone #	1
(C)	ty/State/Zip/Priorie #)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Name)	
	.	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



000329350820

05/16/19--01011--004 **30.00 05/16/19--01011--007 **13.75

9 MAY #6 BAY DE STATE

2019 MAY 16 AH 11: 15

APPROVEU

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Crawfo	ordville Phan	macy Inc		
NAME OF CORPORAT	. <u>P1700000</u>	07831	·		
The enclosed Articles of A					
Please return all correspon	dence concerning this ma	tter to the following:			
	Hir	ion Patel			
		Name of Contact Person	n	_	
	3367	- Jasmine H	till Road	— <u></u> 22	
	Talle	hasse FC Address	32311	019 HAY 16 AH 11:1	
	<u>-,</u>	City/ State and Zip Cod			00
	hiren -	77478 © ya4a sed for future annual report	0,00	- 현행 프	
	E-mail address: (to be us	sed for future annual report	notification)	ં : ળ	
For further information co			874-5778		
Name of C	Contact Person	at (at Co	-) 874-9778 ode & Daytime Telephone Nun	nber	
		payable to the Florida Dep			
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amendi Division P.O. Bo	2 Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amen Divisi Clifto	Address dment Section on of Corporations n Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of		
Crawfordiille Pharma		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P170000783		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Vorida Profit Corporation adopts the following amendmen	nt(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 "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	20	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		~
C. Enter new mailing address, if applicable:	<u> </u>	0
(Mailing address <u>MAY BE A POST OFFICE BQX</u>)		'
	<u> </u>	
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stree	et address)	
New Registered Office Address:	, Florida	
6	City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar w	th and accept the obligations of the position.	

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 = ChiefExecutive 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.

Mike Jones, V as Remove	e, and Sa	lly Smith, SV as an Add.	
Example: X Change	<u> </u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	_D	Harit Patel	Clermont For 34711
X Add			Clarmont Fr 34711
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			6 EED
Remove			
4) Change			<u></u>
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			,
6) Change			
Add			
Remove			

ttach additional sheets, if necessary). (Be specific)	
	_
	2019 HAY
	· · · · · · · · · · · · · · · · · · ·
	<u> </u>
an amendment provides for an exchange, reclassification, or cancellation of issued share	res,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
,	
<u>. </u>	

The date of each amendment(s) adoption: _	May	2019	, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	May 1	days after amendment file date)	
	(no more than 90	days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department		ble statutory filing requirements, this da	ite will not be listed as the
Adoption of Amendment(s) (<u>C</u>	CHECK ONE)		
The amendment(s) was/were adopted by the shareholders was/were sufficient for		number of votes east for the amendment(s	s)
☐ The amendment(s) was/were approved by must be separately provided for each voti.			ent
"The number of votes east for the an	endment(s) was/were	sufficient for approval	
by	voting group)		
6	oting group)		
The amendment(s) was/were adopted by the action was not required. The amendment(s) was/were adopted by the			
action was not required.	·		PAN COLOR
Dated5/15/15			Y 16
Dated 5/15/15	Ex.		
(By a director, pr selected, by an ir	esident or other office	er – if directors or officers have not been hands of a receiver, trustee, or other cour	-
	Hiren Pa	+_(
	(Typed or printed na	ame of person signing)	
_	owner	President person signing)	
	(Title o	person signing)	