P17000030563

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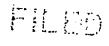
TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: ELITE RETAIL F	PHARMACY INC.	
	BER: P17000030563		
The enclosed Articles	of Amendment and fee are st	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	KIM NGAN LE		
		Name of Contact Perso	n
		Firm/ Company	
	840 111TH AVENUE NOR	TH SUITE 7	
		Address	
	NAPLES, FL 34108		
		City/ State and Zip Cod	е
ELIT	EPHARMACY123@GMAIL	COM	
	E-mail address: (to be u	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
KIM NGAN LE		954 at (de & Daytime Telephone Number
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address ment Section n of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



2013 MAY -6 A 9: 39

FUTER TAIL PHARMACY INC.

ELLIE RETAIL PHARMACY INC.		
(<u>Name</u>	of Corporation as currently file	ed with the Florida Dept. of State)
P17000030563		A CONTROLL OF THE PROPERTY OF
	(Document Number of Cor	poration (if known)
D		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flor.	ida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new n	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	if applicable:	
, ,,		
	_	
C. Enter new mailing address, if appl		
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u>)	
	_	
	_	
D. If amending the registered agent an new registered agent and/or the ne		n Florida, enter the name of the
	KIM NGAN LE	
Name of New Registered Agent	840 LITTH AVENUE NORTH	SHITE 7
	(Florida street ga	
	NAPLES	34108
New Registered Office Address:	(City)	, Florida
	ζ(i,i)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	
		ind accept the obligations of the position.
	1	
	$+$ λ	~
	Signature of New Revist	ered Avent, if chanviny
	Signature of New Registe	ered 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)

Remove

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	$\underline{\mathbf{V}}$	Mike Jones		
_X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	þ	VAN, THANH	840 HITH AVENUE NORTH	
Add			SUITE 7	
X Remove			NAPLES, FL 34108	
2) Change	Р	LE, KIM NGAN	840 HITH AVENUE NORTH	
X Add			SUITE 7	
Remove			NAPLES, FL 34108	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		-		
Remove		-		
6) Change				
Add		-		

(Attach additio	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)
provisions fo	ent provides for an exchange, reclassification, or cancellation of issued shares, rimplementing the amendment if not contained in the amendment itself: plicable, indicate N/A)

. . .

The date of each amendment(s) a date this document was signed.	doption:, if other than th
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the Do	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
MAY 1, 20 Dated)19
Signature	2v
(By a d selecte	irector, president or other officer – if directors or officers have not been d. by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	KIM NGAN LE
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)