

P980000.20103

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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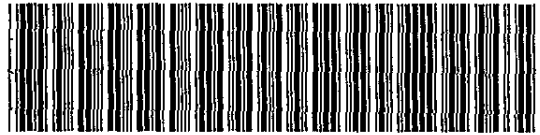
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NC
CRB
7/21/05

Dadepharmacy

Making the Difference!

July 14, 2005

Amendment Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

To Whom It May Concern:

We at "**Dade Pharmacy Discount Incorporated**", document number **P98000020103**, ask that you receive this as official notice that included with this letter you will find an original copy of **Articles of Amendment of a Florida Profit Corporation** for Dade Pharmacy Discount Incorporated. We are currently changing our corporation name to "The Medicare Shoppe Incorporated" as of July 14, 2005.

Cordially,

Mr. Luis A. Fernandez
President

Mr. Edda I. Fernandez
Vice President

The Medicare Shoppe.

Commitment, Integrity & Service!

3013 East Fourth Avenue
Hialeah, Florida 33013
Toll Free: 866.693.3233 (DADE)
Toll Free Fax: 866.693.3234
Local Number: 305.693.3544
Local Fax: 305.693.3519
Website: themedicareshoppe.com

July 14, 2005

Amendment Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

To Whom It May Concern:

We at "**The Medicare Shoppe Incorporated**", document number **P04000167221**, ask that you receive this as official notice that included with this letter you will find an original copy of **Articles of Dissolution for a Profit Corporation** for The Medicare Shoppe Inc. We do not intend to revoke the notice of dissolution of The Medicare Shoppe Incorporated and release the name for immediate use to **Mr. Luis A. Fernandez** for filing a name change Amendment to **Dade Pharmacy Discount Incorporated**, document number **P98000020103**.

Cordially,


Mr. Luis A. Fernandez
President


Ms. Edda I. Fernandez
Vice President

Integrity, Commitment & Service!

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DADE PHARMACY DISCOUNT Inc.

DOCUMENT NUMBER: P98000020103

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luis A. Fernandez

(Name of Contact Person)

DADE Pharmacy Discount Inc.

(Firm/ Company)

3013 East 4th Avenue

(Address)

Hialeah, FL 33013

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Luis A. Fernandez

(Name of Contact Person)

at (305) 693-3544

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

DADE Pharmacy DISCOUNT Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P98000020103

(Document number of corporation (if known))

FILED
05 JUL 15 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

THE MEDICARE SHOPPE INCORPORATED

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

NA

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

NA

(continued)

The date of each amendment(s) adoption: July 14th 2005

Effective date if applicable: July 14th 2005
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were approved 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.

Signed this 14th day of JULY, 2005.

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 A. Fernandez.

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35