

N04000010130

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** I Smile, Inc.

**DOCUMENT NUMBER:** N04000010130

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

Please return all correspondence concerning this matter to the following:

Juliana Hunt  
(Name of Contact Person)

I Smile, Inc.  
(Firm/ Company)

4560 S.W. 68 Circle #4  
(Address)

Miami, Florida 33155  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Juliana Hunt at ( 305 ) 302-5840  
(Name of Contact Person) (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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

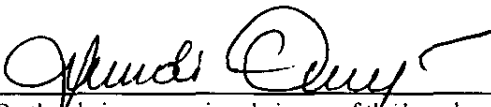


The date of adoption of the amendment(s) was: March 3, 2008

Effective date if applicable: March 3, 2008  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

- The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature   
(By the chairman or vice-chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Andres Ocampo  
(Typed or printed name of person signing)

President of the Board of Directors  
(Title of person signing)

**FILING FEE: \$35**