N0900011823

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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

Amend + MC

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MAR 2 3 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION:	SMILES IN THE MAKING	NC.
DOCUMENT NUMBER:		N09000011823	
The enclosed Article	es of Amendment and fee a	are submitted for filing.	
Please return all cor	respondence concerning th	is matter to the following:	
_	DO	ROTHEA JACKSON	
	Name of Contact Person THE JACKSON-VAUGHANS GROUP, INC Firm/ Company		
			•
-			
1325 S. CONGRESS AVENUE - SUITE 202		<u></u>	
		Address	
	BOYN	TON BEÄCH, FL 33426	
City/ State and Zip Code			
		@BELLSOUTH.NET and for future annual report notification)	
For further informat	tion concerning this matter,	please call:	
DORC	THEA JACKSON	at (561)36	9-4306
Name o	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount r	nade payable to the Florida Departr	ment of State:
□ \$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 Add Amendment Division of O P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301



February 22, 2010

DOROTHEA JACKSON THE JACKSON-VAUGHANS GROUP, INC 1325 S CONGRESS AVE STE 202 BOYNTON BEACH, FL 33426

SUBJECT: SMALL SMILES IN THE MAKING, INC.

Ref. Number: N09000011823

We have received your document for SMALL SMILES IN THE MAKING, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please mail in all three pages of the amendment.

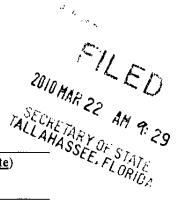
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 210A00004274

Articles of Amendment to Articles of Incorporation of



SMALL SMILES IN THE MAKING, INC.

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

N09000011823

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

	S IN THE MAKIN		. 10 .2
he new name must be distinguishable and bbreviation "Corp." or "Inc." <mark>"Company</mark>			icorporated" or the
B. Enter new principal office address, if applicable:		2608 PIONEER ROAD	
Principal office address <u>MUST BE A STR</u>	EET ADDRESS)	ORLANDO,FL 32	2808
. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		2155 SANDRIDG	E CIRCLE
muning numers mai be a rost or	TICL BOX		
		EUSTIS,FL 32726	
. If amending the registered agent and/o new registered agent and/or the new r		address in Florida, e	
		address in Florida, e	
new registered agent and/or the new r	egistered office ad	: address in Florida, e dress:	
new registered agent and/or the new r	egistered office ad	e address in Florida, e dress: N/A	
new registered agent and/or the new r	egistered office ad	e address in Florida, e dress: N/A	nter the name of th
new registered agent and/or the new r	egistered office ad	e address in Florida, e dress: N/A ida street address)	nter the name of th

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
	N/A		☐ Add
			☐ Remove
			
		_	
			☐ Add
			
E. If amer	nding or adding additional Article additional sheets, if necessary). (1	<u>s, enter change(s) here</u> : Be specific)	
N/A		• • •	
14,7 4			
		,	

The date of each amendmen	t(s) adoption: FEBRUARY 12, 2010
	(date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/w was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of d	members entitled to vote on the amendment(s). The amendment(s) was/were irectors.
Signature (B	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, oner court appointed fiduciary by that fiduciary)
	TRACY TAYLOR (Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)