P96 000097556

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(Address)	_
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PICK-UP WAIT MAIL	
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C. GOLDEN AUG 22 2020

COVER LETTER

TO: Amendment Section &

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations	
NAME OF CORPORATION: <u>OILVITE</u> , INC. DOCUMENT NUMBER: P96000097556	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
MICHAEL F. OCHEA Name of Contact Person FORENSIC RESEATCH GROUP IN Firm/ Company 110 RENAISS ANCE CIRCLE Address MAULDIN SC 29662 City/ State and Zip Code	<u>C.</u>
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MICHAEL F. O'SHEM at 1 264 , 228 - 222 Name of Contact Person Area Code & Daytime Telephone	<u>) </u>
Name of Contact Person Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

to

Articles of Incorporation			
of		4.	
()TLUTTE I	MC. 7222 no 13	á'ili. Lo	
(Name of Corporation as currently	filed with the Florida Dept. of State)	40111115	
P9600009	7556		
1 1	Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amer	ndment(s) to	
A. If amending name, enter the new name of the corporation: UNION DENTAL HOLDINGS name must be distinguishable and contain the word "corporation," "Co". A "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	The ompany," or "incorporated" or the abbreviation "Co professional corporation name must contain the	new rp.," word	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<i>N/</i> A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	110 RENGISSANCE CER MAULDIN, SC 29662	– CLE	
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ess in Florida, enter the name of the	_	
(Florida stre	et address)		
New Registered Office Address:	, Florida		
New Registered Agent's Signature, if changing Registered Agent:			

Thereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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: F= 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>b.l.</u>	John Doe			
X Remove	<u>V</u>	Mike Jones	N/A		
X Add	<u>sv</u>	Sally Smith	/V/Pr		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
11 Change					
Add					
Remove					
2) Change					
Add					
Remove 3) Change					
Add					
Remove					_
4) Change					_
Add					
Remove					
51 Change					
Add					
Remove					
6) Change					
Add					
Remove					

(.	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
	<i>N//</i> }	
		_
F. <u>1</u>	f an amendment provides for an 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)	
	0//0	
.—		
		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
the tive date it applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this didocument's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	tent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
tvoting group)	
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 courappointed fiduciary by that fiduciary)	
(Typed or primed name of person signing)	
PSTD (Title of person signing)	