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(Re	equestor's Name)	:
(Ac	ddress)	:
		i I
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Name)	·
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	;
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Amend.

7B 9/6

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	*	Hoffman & Moss, DDS, PA	
DOCUMENT NUMBER:	# 583-674		
The enclosed Articles of Amen	dment and fee a	are submitted for filing.	
Please return all correspondence	e concerning th	is matter to the following:	
	Dr. F	Frank Moss	
	(Name	of Contact Person)	
	Hoffman	& Moss, DDS, PA	
	(Firm/ Company)		
	8475 Seminole Boulevard		
**************************************		(Address)	
	Seminole	, Florida, 33772	
	(City/ S	State/ and Zip Code)	
For further information concern	ning this matter	, please call:	
Dr. Frank Moss		at (727) 393-6024	
(Name of Contact Pe	erson)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following	owing amount:		
	Filing Fee & cate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Sec Division of Cor	ction porations	Street Address Amendment Section Division of Corpore 409 F. Gaines Street	rations

Tallahassee, FL 32399

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of



 · •	Hoffman & Moss, DDS, RA
 (Managarana)	and an arrange of the state of the state of

	i Hoffman ⋅ Moss, LDS,,,RA
(Name of	corporation as currently filed with the Florida Dept. of State)
	# 583-674
	(Document number of corporation (if known)
	ection 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> ent(s) to its Articles of Incorporation:
NEW CORPORATE NAME	(if changing):
	""company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") tain the word "chartered", "professional association," or the abbreviation "P.A.")
	(OTHER THAN NAME CHANGE) Indicate Article Number(s)
and/or Article Title(s) being an	nended, added or deleted: (BE SPECIFIC)
Adding a clarifying amendment to	include the following:
1.) Frank Moss. DI	OS is now the sole officer and director of Hoffman & Moss, DDS, PA
	!
	(Attach additional pages if necessary)
	exchange, reclassification, or cancellation of issued shares, provisions ent if not contained in the amendment itself: (if not applicable, indicate N/A
:	
,	

(continued)

The date of each amendment(s) adoption: 25 August 2004			
Effective date if applicable: 25 August 2004			
	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
	was/were approved by the shareholders. The number of votes cast for y the shareholders was/were sufficient for approval.		
	was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote mendment(s):		
"The number of	votes cast for the amendment(s) was/were sufficient for approval by		
V.	(voting group)		
	was/were adopted by the board of directors without shareholder action on was not required.		
☐ The amendment(s) v shareholder action v	was/were adopted by the incorporators without shareholder action and vas not required.		
Signed this 25th day of	August 2004		
Signature	frank Ohren_ AS.		
selecte	rector, president or other officer - if directors or officers have not been ed, by an incorporator - if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)		
	Frank Moss, DDS		
(Typed or printed name of person signing)			
Vice-President / Sect.			
	(Title of person signing)		

FILING FEE: \$35