

600848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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TN 12-31-11

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09/02/11--01028--024 **35.00

Amend

FILED
-11 OCT 28 AM 10:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TN 12-31-11



Maronetta F. Miller
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www.saul.com

October 27, 2011

Transmitted by Federal Express

Amendment Section
Division of Corporations
Attention: Tina Roberts
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: South Florida Center for Periodontics & Implant Dentistry, P.A.
Document Number 600848

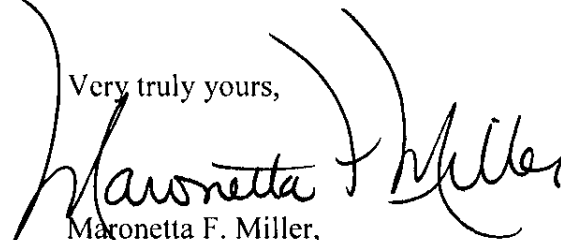
Dear Ms. Roberts:

Enclosed please find originally executed Amendment for the above entity for the purpose of removing certain Officers and Directors of record. For your information, on July 31, 2011 I forwarded the document to the Amendment Section for filing. When I checked on line to see if the change had taken place I saw that it did not and called the office (September 20th). I was told by your representative that the form was rejected and mailed back to me on September 8th because the signature was not original. To date I have not received the rejected form.

I will check your system again in ten days to verify that this Amendment is effective. Should you require further information please let me know.

Thank you for your cooperation.

Very truly yours,



Maronetta F. Miller,
Legal Assistant

enclosure

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: South Florida Center for Periodontics & Implant
Dentistry, P.A.

DOCUMENT NUMBER: 600848

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

Please return all correspondence concerning this matter to the following:

Maronetta F. Miller, Legal Assistant

Name of Contact Person

Saul Ewing LLP

Firm/ Company

2 North Second Street, 7th Floor

Address

Harrisburg, PA 17101

City/ State and Zip Code

ganelboca@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maronetta F. Miller, Legal Assistant

Name of Contact Person

at (717)

257-7524

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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 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

Articles of Amendment
to
Articles of Incorporation
of

South Florida Center For Periodontics + Implant
(Name of Corporation as currently filed with the Florida Dept. of State) Dentistry, P.A.
600848

(Document Number of Corporation (if known))

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

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

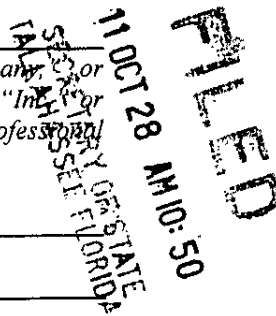
(Florida street address)

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing



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>	<u>Type of Action</u>
<u>PSD</u>	<u>Marvin Rosenberg, MD D.S.</u>	<u>1515 N Flagler Drive</u> <u>Suite 301</u> <u>West Palm Beach, FL 33401</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VPD</u>	<u>Robert L. Holt, DMD, PHD</u>	<u>1515 N Flagler Drive</u> <u>Suite 301</u> <u>West Palm Beach, FL 33401</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>SECD</u>	<u>Mauricio A. Gutierrez, DMD</u>	<u>1515 N Flagler Drive</u> <u>Suite 301</u> <u>West Palm Beach, FL 33401</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

F. If 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)

N/A

The date of each amendment(s) adoption: July 7, 2011
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted 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):

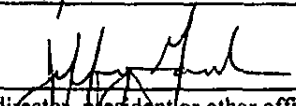
"The number of votes cast for the amendment(s) was/were sufficient for approval

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.

Dated 10/26/11

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)

Jeffrey Ganeles, D.M.D.
(Typed or printed name of person signing)

President and Director
(Title of person signing)