646603

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TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	PROSS, KANTER	AND TINDELL, D.M.D. :	5., r.a. 	<u></u>
DOCUMENT NUM	. <u></u>			
	s of Amendment and fee are sub	omitted for filing.		
Please return all corr	espondence concerning this mat	ter to the following:		
	DR, BARRETT I. TINDELL			
		Name of Contact Person	 1	
	PROSS, KANTER AND TIN	DELL, D.M.D.'S., P.A.		
		Firm/ Company		
	801 W. FLETCHER AVENU	• •		
		Address		
	TAMPA, FL 33612			
		City/ State and Zip Code	е	
	btindelldds@gmail.com			
	E-mail address: (to be us	ed for future annual report	notification)	
For further informat	ion concerning this matter, pleas	se call:		
DR. BARRETT L T	INDELL	at (<u>813</u>) 495-8255 OR	813.961-1727
Name	e of Contact Person	Area Co	de & Daytime Telephone	Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
☐ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ailing Address mendment Section		Address Iment Section	

Division of Corporations

Tallahassee, FL 32303

The Centre of Tailahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

PROSS, KANTER AND TINDELL, D.M.D.'S., P.A.

(Name of Corporation as curren	tly filed with the Florida	Dept. of State)	and the
646603			" - <i>U</i>
	of Corporation (if known)	2024 FEB 12	1-46
Pursuant to the provisions of section 607.1006, Florida Statutes, thi	s Florida Profit Corporatio	on adopts the following	owing amendment(s)
its Articles of Incorporation:		,	3,578
A. If amending name, enter the new name of the corporation:			/ (_
NORTH POINTE DENTAL PA			The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	- A projessional corporati	ted" or the abbre on name must co	viation "Corp" ontain the word
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)			
	diamental Elevido enter th	a name of the	
D. If amending the registered agent and/or registered office at new registered agent and/or the new registered office addr-	ess:	ic name or the	
Name of New Registered Agent			
(Florida	street address)		
Įr 101 mil	ancer many		
New Registered Office Address:	(City)	, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	ent: ar with and accept the oblig	gations of the pos	ition.
Thereby accept the appointment as registered agent. I am jumin	,	,	
Signature of Ne	w Registered Agent, if chan	ging	
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; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive 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>PT</u>	John Do	<u>c</u>	
X Remove	<u>V</u>	Mike Joi	ne <u>s</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn		
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change	_			
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

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) N/A	amending or adding additional Artitach additional sheets, if necessary).	(Be specific)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
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provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,	
	provisions for implementing the am (if not applicable, indicate N/4)	endment if not contained in the amendment itself:	
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	<u> </u>		_
	<u>. </u>		

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
(no more man so days agree assument for assument
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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)
FEBRUARY I, 2024 Dated
(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)
DR. BARRETT I. TINDELL
(Typed or printed name of person signing)
DIRECTOR AND PRESIDENT