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Division of Corporations

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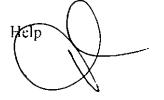
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## REGISTERED AGENT CHANGE ASPEN DENTAL MANAGEMENT, INC.

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By:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu nge is submitted for a corporation organized under the laws of the State of <u>Delay</u> r to change its registered office or registered agent, or both, in the State of Florid	ware	_
1. The name of t	he corporation: ASPEN DENTAL MANAGEMENT, INC.		
2. The principal	OULD AND EDG CONTINUE DI DIVILLA VI		
-7 7 1 1 4 1 morphi	EAST SYRACUSE, NY 13057		
3. The mailing a	ddress (if different):	<u>-</u>	
4. Date of incorp	poration/qualification: 04/22/2009 Document number: F0900000164	2	
	street address of the current registered agent and registered office on file with the them to f State: (If resigned, enterresigned)	ie	
	CORPORATION SERVICE COMPANY		
	1201 HAYS STREET	1	~
	TALLAHASSEE, FL 32301-2525	- [	n72 O
6. The name and (ifchanged):	street address of the new registered agent (if changed) and /or registered office		022 OCT 18
	C T Corporation System		
	1200 South Pine Island Road		AH II: 06
	P.O. Box NOT acceptable Plantation, FL 33324	I	δ
The street addre	ess of its registered office and the street address of the business office of its reg be identical.	gistered ag	ent,
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	cer so	
- Cit-	JOE DAVIS, VICE PRESIDENT  Printed or typed name and title		
Thereby accept I further agree to of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complet d I am familiar with and accept the obligation of my position as registered ag ng filed merely to reflect a change in the registered office address, I hereby co been notified in writing of this change.	te performe ent. Or if infirm that	unce this the
C T Corporation	Mickle Holden 10/17/2022  nature of Registered Agent Date		
Sign	nature of Registered Agent Date		_
If signing on be	half of an entity:		
	Holden, Assistant Secretary		
Ty	yped or Printed Name		
	* * * FILING FEE: \$35.00 * * *		