H21305

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORI	PORATION: LAURENC	E TODD HUBER, DDS 8	R PAUL PLASKY		
DOCUMENT NU	MBER:	H21305			
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.			
Please return all co	orrespondence concerning thi	s matter to the following:			
	CANDACE ROSS				
Name of Contact Person					
GELBER AND COMPANY					
		Firm/ Company			
11450 INTERCHANGE CIRCLE NORTH Address					
		•			
	MI	BAMAR EL 33035			
MIRAMAR FL 33025 City/ State and Zip Code -					
	GELBER01 E-mail address: (to be used	@BELLSOUTH.NET d for future annual report notification)		
For further information	ation concerning this matter,	please call:			
C	ANDACE ROSS	at (at (954)Area Code & Daytime	435-4222		
Name	of Contact Person	Area Code & Daytime	l'elephone Number		
Enclosed is a chec	k for the following amount m	nade payable to the Florida Dep	artment of State:		
	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle		



March 1, 2010

CANDACE ROSS GELBER AND COMPANY 11450 INTERCHANGE CIRCLE NORTH MIRAMAR, FL 33025

SUBJECT: LAURENCE TODD HUBER, D.D.S. AND PAUL PLASKY, D.D.S.,

P.A.

Ref. Number: H21305

We have received your document for LAURENCE TODD HUBER, D.D.S. AND PAUL PLASKY, D.D.S., P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II

Letter Number: 010A00004915

Articles of Amendment to Articles of Incorporation of

LAURENCE TODD HUBER, D.D.	S. AND PAUL PL	ASKY, D.D.S., P.A.	
(Name of Corporation as curr	ently filed with the Flori	da Dept. of State)	
	H21305		
(Document Num	nber of Corporation (if kr	lown)	
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this	Florida Profit Corporation a	dopts the following
A. If amending name, enter the new name o	f the corporation:		
KEY LARGO	DENTAL ASSOCIAT	ES P.A.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "In	nc," or "Co". A professiona	ated" or the il corporation
B. Enter new principal office address, if app			
(Principal office address <u>MUST BE A STREE</u>	ET ADDRESS)	-4	25
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI) D. If amending the registered agent and/or new registered agent and/or the new regi	CE BOX)		MAR 12 PH 12: 47 CRETIABLE PESTATION CHE
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	·
	•	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a		· · · · · · · · · · · · · · · · · · ·	the position.

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) **Title** <u>Name</u> Address **Type of Action** ☐ Add ☐ Remove ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)

The date of each amendment(s) adoption: FEBRUARY 22, 2010	
Effective date if applicable: FEBRUARY 22, 2010 [Continue of adoption is required]	
(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 by the shareholders was/were sufficient for approval.	nent(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following st 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 share action was not required.	holder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
Dated 706. 22 2010	
Signature Fail Marky Des	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	en ourt
PAUL PLASKY	
(Typed or printed name of person signing)	
(Title of person signing)	