438003

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Chapter.

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: DHIRAJ CHOTAL, D.D.S., P.A. DOCUMENT NUMBER: H38003 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DHIRAJ CHOTAL Name of Contact Person DHIRAJ CHOTAL, D.D.S., P.A. Firm/ Company 2526 NORTH STATE ROAD 7 Address MARGATE, FLORIDA 33063 City/ State and Zip Code DRCHOTAI@DRCHOTALCOM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DHIRAJ CHOTAL Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & □S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) 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

DHIRAJ CHOTAL D.D.S., P.A. (Name of Corporation as currently filed with the Florida Dept. of State) H38003 (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: 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 <u>MUST BE A STREET ADDRESS</u>) 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 (Florida street address) New Registered Office Address: (Zip Code) (City) 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)

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 = Chief Executive 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 Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	RASHMI CHOTAI	2526 NORTH STATE ROAD 7
X Add			MARGATE, FL 33063
Remove			
2) Change	-		
Add			
Remove			nd#-df/-df-47-
3) Change			
Add			
Remove			R
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	•		
Add			
Remove			

(Attach additional sheets, if necessar	ory): (Be specific)	
	Addition of the second of the	
. If an amendment provides for an	exchange, reclassification, or cancellation of issued shares,	
	amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A	A)	
N/A		
	300176-9-00-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-	
		<u></u>

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	3/29/2016	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date volepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes can	st for the amendment(s) was/were sufficient for approval	
by		
• —	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
action was not required.	dopted by the incorporators without shareholder action and shareholder	
08/29/201 Dated Signature	Drist as	
(By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	DHIRAJ CHOTAI	
	(Typed or printed name of person signing)	<u></u>
	PRESIDENT	
•	(Title of person signing)	