793910

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2018 HAY 22 PH 3: 50

C. GOLDEN
MAY 2 3 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Florida Dental Cer	nters, P.A.					
	DOCUMENT NUMBER: 193910						
The enclosed Article	s of Amendment and fee are su	abmitted for filing.					
Please return all corr	espondence concerning this ma	tter to the following:					
	Elizabeth Haney Blaschka						
	Name of Contact Person						
	Florida Dental Centers, P.A.						
		Firm/ Company					
	2189 Cleveland Street, Suite	252					
	Address						
	Clearwater, FL 33765						
		City/ State and Zip Co	de				
eliza	abeth@floridadentalcenters.com	n					
	_	sed for future annual repor	rt notification)				
For further informati	on concerning this matter, plea	se call:					
Elizabeth H. Blaschka		at (ode & Daytime Telephone Number				
Name	of Contact Person	Area C	ode & Daytime Telephone Number				
Enclosed is a check (for the following amount made	payable to the Florida Dep	partment of State:				
■ \$35 Filing Fee	S43.75 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		Amer Divis Clifto	t Address adment Section ion of Corporations on Building Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Florida Dental Centers, P.A.

2018 MAY 22 PM 3: 50

J93910	tly filed with the Florida Dept. of St&ECRETARY OF STATE TALL AHASSEE. FLORID
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
N/A	
Name of New Registered Agent	
Pionaa :	street address)
New Registered Office Address: 1878	, Florida,
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	
I hereby accept the appointment as registered agent. I am familia	r 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	DP	Schmidt, Paul A.	2189 Cleveland St, Suite 252	
Add			Clearwater, FL 33765	
X Remove				
2) X Change	DP	Hutchinson, Keith A.	2189 Cleveland Street, Suite 252	
Add			Clearwater, FL 33765	
Remove				
3) Change				
Add				
Remove				
4) Change	<u></u>			
Add				
Remove				
5) Change				
, Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
F. If an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

	April 30, 2018	
The date of each amendment(s) at	loption:	, if other than the
date this document was signed.		
Apri Effective date <u>if applicable:</u>	130, 2018	
Effective date <u>it applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment fficient for approval.	nt(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
<u> </u>	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
Signature (By a d selected	irector, president/or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other cased fiduciary by that fiduciary)	
	Keith A. Hutchinson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	