

Division of Corporations

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LO7000060410

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BUSH ROSS, P.A.
Account Number : I19990000150
Phone : (813) 224-9255
Fax Number : (813) 223-9620

L. SELLERS
AUG 12 2009
EXAMINER

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VERMILION DOLLAR LIPS PLLC

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August 7, 2009

VERMILION DOLLAR LIPS PLLC
1120 E KENNEDY BLVD
APT. 1216
ST PETERSBURG, FL 33732

SUBJECT: VERMILION DOLLAR LIPS PLLC
REF: L07000060410

*see attached letter
Thank you.*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is P01000095871.

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) 245-6967.

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BUSH ROSS PA

003/006

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Leslie Sellers
Regulatory Specialist II

FAX Aud. #: H09000177426
Letter Number: 509A00027071

AUG-11-2009 12:13P FROM:

7275854766

TO: 8132239620

P.1

**ROBERT W. GORDON, D.D.S., P.A.
7000 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228**

August 6, 2009

Florida Division of Corporations
Registration Section
409 E. Gaines St.
Tallahassee, FL 32399

Re: **ROBERT W. GORDON, D.D.S., P.A.**
Document Number: P01000095871
and
ROBERT W. GORDON, DDS, PLLC,
a new Florida filing

Dear Sir or Madam:

Please allow this letter to confirm that ROBERT W. GORDON, D.D.S., P.A. (Florida document number P01000095871) (the "Corporation") has been dissolved and I have no intention on reinstating the Corporation in my capacity as sole officer of the Corporation. I hereby give my permission to allow VERMILION DOLLAR LIPS, PLLC (the "PLLC") (L07000060410) to change its name to ROBERT W. GORDON, DDS, PLLC, a Florida professional limited liability company.

Sincerely,


Robert W. Gordon, DDS

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VERMILION DOLLAR LIPS PLLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JUNE 7, 2007 and assigned
Florida document number L07000060410.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ROBERT W. GORDON, DDS, PLLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent:

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated AUGUST 3rd, 2009


Signature of a member or authorized representative of a member

ROBERT W. GORDON, MANAGER

Typed or printed name of signer

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Filing Fee: \$25.00

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