

L09000030592

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB -3 PM 2:59

FEB 26 2012

T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ivan Martinez-Veliz Dental Services LLC.  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ivan Martinez  
Name of Person

\_\_\_\_\_  
Firm/Company

1010 Windetley Pl. #109  
Address

Maitland, FL, 32751  
City/State and Zip Code

Ivan\_Mar2@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ivan Martinez at (407) 865-4493  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

12 FEB -3 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

January 24, 2012

IVAN MARTINEZ  
1010 WINDERLEY PL  
# 109  
MAITLAND, FL 32751

SUBJECT: IVAN MARTINEZ-VELIZ DENTAL SERVICES, LLC  
Ref. Number: L09000030592

We have received your document for IVAN MARTINEZ-VELIZ DENTAL SERVICES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 312A00001678

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

12 FEB -3 PM 2:59

Ivan Martinez Veliz Dental Services LLC  
(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 March 27 2009 and assigned Florida document number L09000036592

This amendment is submitted to amend the following:

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

IMV Dental Lab. L.L.C.

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)

140 circle Drive Suite 3  
Maitland, FL 32751

**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:

IVAN MARTINEZ

New Registered Office Address:

140 circle Drive Suite 3

Enter Florida street address

Maitland

City

Florida

32751

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.

Ivan Martinez  
If Changing Registered Agent, Signature of New Registered Agent

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

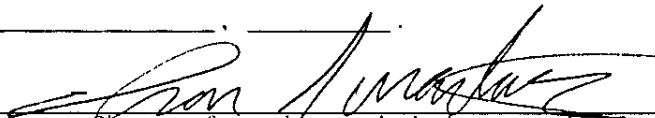
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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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

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 FEB - 3 PM 2:59

Dated \_\_\_\_\_

  
Signature of a member or authorized representative of a member

Ivan S. Martinez  
Typed or printed name of signee