## L12000046485

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(Business Entity Name)
(Document Number)
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1.			ENTAL, L.L.C. NAME AND DOCUMENT #	1)			
2.		(CORPORATE N	AME AND DOCUMENT #		<u> </u>		
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ocusign Envelope ID: 473006A0-C712-4A11-B99B-4B8390AB8D4D	AMENDMENT	
T T	0	
	ORGANIZATION OF	FILED
Senior Dental, L.L.C. ( <u>Name of the Limited Liability Comp</u> (A Florida Limited		4 SEP 23 AM 9: 36
The Articles of Organization for this Limited Liability Company	IALL	AHASSEE. FLORIDA
Florida document number L12000046485		
This amendment is submitted to amend the following: A. If amending name, <u>enter the new name of the limited liab</u>	<u>ility company here</u> :	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	7500 SW 8th Street	
(Principal office address MUST BE A STREET ADDRESS)	Suite 400	
	Miami, FL 33144	
Enter new mailing address, if applicable:	7500 SW 8th Street	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 400	
	Miami, FL 33144	

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

Name of New Registered Agent:	Paul McBride	
New Registered Office Address:	7500 SW 8th Street, Suite -	100
<u> </u>	En	ter Florida street address
	Miami	, Florida <sup>33144</sup>
	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 605. 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.

—signed by: Paul M. McBride, II

2740060E22EA40E If Changing Registered Agent, <u>Signature of New Registered Agent</u>

Docusign Envelope ID: 473006A0-C712-4A11-B99B-4B8390AB8D4D trainengung Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager

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AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard C. Lage DDS PA	1321 SW 107th Avenue	🗆 Add
		Suite 216A	
		Miami, FL 33174	🗆 Change
P, CEO	Paul McBride	7500 SW 8th Street	■ Add
		Suite 400	
		Miami, FL 33144	□Change
CFO	Claudio Kapusta	7500 SW 8th Street	<b>=</b> Add
		Suite 400	
		Miami, FL 33144	□Change
C00	Douglas Johnson	7500 SW 8th Street	
		Suite 400	🗆 Remove
		Miami, FL 33144	□Change
СТО	Eric Santiago	7500 SW 8th Street	<b>=</b> Add
		Suite 400	🗆 Remove
		Miami, FL 33144	□ Change
CRO	Nick Campbell	7500 SW 8th Street	🗃 Add
		Suite 400	🗌 Remove
		Miami, FL 33144	□Change

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

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	EP 23
	TALLAHASSE
	EP 23 A
	EP 23 AM
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	EP 23 AN 9:
	EP 23 AN 9: 30
	TALLAHASSEE. FLORIDA

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	September 20	2024
Dated	,	

1	Signed by	7			
. 1			McBride,	"	

Signature of a member or authorized representative of a member

Paul McBride