

L14000101909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200263281362

08/18/14--01001--011 **25.00

RECEIVED
DEPARTMENT OF STATE
14 AUG 15 2014 3:42 PM

AUG 18 2014
T. HAMPTON

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA
14 AUG 15 AM 9:42

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP:

8/15

☐ CERTIFIED COPY

☒ PHOTOCOPY

☐ CUS

☒ FILING

LLC amendment

1. Summit Dental Care, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

ARTICLES OF AMENDMENT TO THE ARTICLES OF ORGANIZATION
OF
SUMMIT DENTAL CARE, LLC

Pursuant to the provisions of Section 605.0202 of Florida Limited Liability Company Act, the undersigned Company adopts the following Articles of Amendment to its Articles of Organization.

1. The Articles of Organization were filed on June 25, 2014 and assigned document number L14000101909.

2. This Amendment is submitted for the purpose of amending Article 1 of the Articles of Organization in order to change the name of the Company name as follows:

"The name of the limited liability company shall be "ISLAND
PARADISE DENTAL, LLC"

EXECUTED BY the undersigned as an authorized Manager of the Company this 11
day of August, 2014.

SUMMIT DENTAL CARE, LLC

By: 
Robert J. Abbiati, Manager

14 AUG 15 AM 9:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA