L1700000 4117

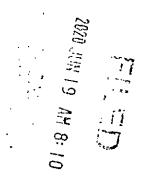
(Rec	questor's Name)	
1044	dress)	
lunc	ness)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	





100346084541

06/19/20--01020--010 **80.00



AUG 0 5 2020 S. YOUNG

COVER LETTER

	egi strati Division o					
CUD IEC			CHILC			
SUBJEC	1:		Name of Limi	ited Liability Company		
The enclo	sed Articl	es of A	mendment and fee(s) are sub-	mitted for filing.		
			dence concerning this matter	_		
			ALICE REICH			
				Name of Person		
			DR. ALICE FAMILY DEN	NTISTRY LLC		
				Firm/Company		
	300 NW 70TH AVENUE SUITE 206A					
				Address		
			PLANTATION FL 33317			
				City/State and Zip Code		
			`1	eich@gmail.com		
			·	to be used for future annual report	notification)	
For furthe	r informa	tion co	ncerning this matter, please co	all:		
ALICE R	EICH			at (954)	205-6533	
	N	ame of l	Person	Area Code Day	time Telephone Number	
Enclosed	is a check	for the	following amount:			
□ \$ 25.0	0 Filing F	'ce	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certificate Copy (additional copy is enclosed	
	Mailing A Registrat			Street Address Registration		
			rporations	Division of (
	P.O. Box				of Tallahassee	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALICE REICH 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 1/1/2017 Florida document number L17000004117 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: DR. ALICE FAMILY DENTISTRY LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 300 NW 70TH AVENUE SUITE 208A Enter new principal offices address, if applicable: PLANTATION FL 33317 (Principal office address MUST BE A STREET ADDRESS) 151 North Nobhill Road Suite 466 Enter new mailing address, if applicable: Plantation, FL 33324 (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

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Add
			\ _Remove
			DAdd
			□Remove
			Change
			□Add
		· · · · · · · · · · · · · · · · · · ·	□Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
			□Add
			□Remove
			Change
			□Remove
			□ Change

						-		
								<u> </u>
	<u> </u>							
	<u></u>	<u> </u>						
								
							 	
							- · · · · · · · · · · · · · · · · · · ·	
								<u></u>
		<u> </u>						
						•		
								_
-				· · · · · · · · · · · · · · · · · · ·				
								
	-	_	· · · · · · · · · · · · · · · · · · ·				·	
-	 .							
						4		
m effectiv <u>ote:</u> If th	date, if other that e date is listed, the da ne date inserted in t s effective date on	te must be spec his block doe	ific and cannot s not meet the	e applicable st	of filing or more atutory filing re	doption (option) (opt	filing.) Pursuant to	605.0207 listed as
ecord spo is filed.	ecifies a delayed ef	fective date, t	out not an effi	ective time, at Text	12:01 a.m. on t	he carlier of: (b)) The 90th day a	ifter the
ted <u>/</u>	06/12/2020	· · · · · · · · · · · · · · · · · · ·	, /	·				
ب	<u>/</u>	Signatur	A CL V	Or sutherized a	coresentative of a	тетрег		
		0						
	ALICE REICH							

Filing Fee: \$25.00