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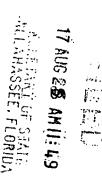
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LaMaster Law

MASTER YOUR FUTURE

MATT LAMASTER, ESQ.

Admitted in Michigan and Florida matt@lamasterlaw.com

The LaMaster Law Firm, PLLC 7988 Farrant St. Commerce Twp., MI 48382 269.760.1499 (T) 248.694.2083 (F)

August 23, 2017

Florida Department of State Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Dalia Al- Azzawi, DMD, PLLC (L17000167719) Re: Articles of Amendment to Articles of Organization Name Change

To Whom It May Concern:

This letter is to inform you that Dalia Al-Azzawi, DMD, is filing this Articles of Amendment to Articles of Organization of Dalia Al-Azzawi, DMD, PLLC to change the name of the Company to Gardens Family Dentistry, PLLC.

Enclosed is one check for \$25 for the filing. Please feel free to contact me if there are any questions.

Regards,

The LaMaster Law Firm, PLLC

Matt LaMaster, Esq.

Math Su Mark

Enclosures

· COVER LETTER

TO: Registration Section Division of Corporation			
SUBJECT: <u>DALIA AL</u>	<u>-AZZAWI, DMD, PLLC</u> Name of Limi	ited Liability Company	<u></u>
The enclosed Articles of Arr	endment and fee(s) are subr	mitted for filing.	
Please return all corresponde	ence concerning this matter t	to the following:	
		Dalia Al- Azzawi Name of Person	
		Firm/Company	
	717_M	laritime Way Address	
	Palm Bea	ach Gardens, FL 33410 City/State and Zip Code	
-	dalia arif@gı E-mail address: (t	mail.com to be used for future annual report notific	eation)
For further information conc	erning this matter, please ca	dl:	
Dalia Al-Azzawi Name of Pe		at (<u>317</u>) <u>840- 946</u> Area Code Daytime	3 Telephone Number
Enclosed is a check for the f	ollowing 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DALIA AL- (Name of the Limited (A	AZZAWI, DMD, PLLC Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liab	ility Company were filed on8/7/2017 and assigned
Florida document number <u>L17000167719</u>	,
This amendment is submitted to amend the follow	ing:
A. If amending name, enter the new name of the	ne limited liability company here:
Gardens Family Dentistry, PLLC	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:
(Principal office address MUST BE A STREET)	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
	registered office address on our records, enter the name of the
registered agent and/or the new registered offic	e address here:
	Sy and Sy and
Name of New Registered Agent:	
New Registered Office Address:	
<u> </u>	Enter Florida street address
	, Florida

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>	Address	Type of Action		
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			□ Change		
	-		□ Add		
			□ Remove		
			□ Change		
			□ Add		
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			Solution Change		
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of tote: If the date inserted in this block does not meet the applicable status ocument's effective date on the Department of State's records.	(optional) filing or more than 90 days after filing.) Putory filing requirements, this date will	irsuant to 605.0207 I not be listed as	' (3): the
e record specifies a delayed effective date, but not an effe	ective time, at 12:01 a.m. on	, the earlier of	f:
The 90th day after the record is filed.			
The 90th day after the record is filed.	\sim		

Page 3 of 3

Filing Fee: \$25.00