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I ALBRITTON

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 210482 5141074

AUTHORIZATION :

COST LIMIT : \$ 25 00

ORDER DATE: November 8, 2021

ORDER TIME : 2:49 PM

ORDER NO. : 210482-005

CUSTOMER NO: 5141074

DOMESTIC AMENDMENT FILING

NAME: MIDDLEBURG ASPEN PLLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

MIDDLEBURG ASPEN PLLC SUBJECT: 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: Linda Wainwright Name of Person Aspen Dental Management, Inc. Firm/Company 800 W. Fulton Market Address Chicago. IL 60607 City/State and Zip Code Linda.Wainwright@aspendental.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Linda Wainwright Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MIDDLEBURG ASPEN PLLC		
(Name of the Limited Liability (A Florida	Company as it now appears on our records Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 10/04/2021	and assigned
Florida document number L21000433977		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
MIDDLEBURG DENTAL, PLLC		
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	12
(Principal office address MUST BE A STREET ADDRI	ECC)	150
Trincipal office address (1031 BE A STREET ADDRE	<u> </u>	<u>۔۔۔۔</u> غِغ
		
	N/A	ල
Enter new mailing address, if applicable:	NA	
(Mailing address MAY BE A POST OFFICE BOX)		ф. " "
		· ~
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter t</u>	he name of the new registered
Name of New Registered Agent: N/A		
New Registered Office Address:		
	Enter Florida street address	
		rida
	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.

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	N/A	N/A	□Add
			□Remove
			□Add
			□Remove
			□Change
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			□Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A
	·
Effect	ive date, if other than the date of filing:
ii an eii Note:	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
recor	d 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
Dated .	NOVEMBER 8 2021
	= /21C
	Signature of a member or authorized representative of a member
	IONG VINIDADA
	JONG YUN PARK

Filing Fee: \$25.00