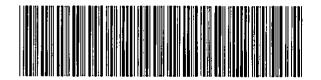
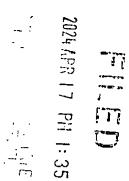


(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
<u>(====================================</u>
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





04717/24--01027--010 **25.00





COVER LETTER

	ation Sec n of Corp	ction porations			
Lal SUBJECT:	kes Denta	l Medical Properties LLC			
SUBJECT		Name of Lim	nited Liability Compan	у	
The enclosed Ar	ticles of /	Amendment and fee(s) are sub	omitted for filing.		
Plcase return all	correspor	ndence concerning this matter	to the following:		
		Matthew Agnini			
			Name of Perso	n	
			Firm/Company	y	
		1022 Shore Acres Dr.			
		Leesburg, FL 34748	Address		
			City/State and Zip	Code	
		agninidds@gmail.com			
For further infor	mation co	E-mail address: (neerning this matter, please c	to be used for future a	nnual report notif	cation)
Kayden Genta	manon co	meerining this matter, please c	800	375-2453	
	Name of	Person	at (at Code	Daytime	Telephone Number
Enclosed is a che	eck for the	e following amount:			
≡ \$25.00 Filing	g Fce	□ \$30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Certified Copy (additional copy	ру	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Address ration S			ect Address: gistration Sec	tion
Divisio		orporations	Div	ision of Corp	porations
		L 32314		e Centre of Ta 5 N. Monroe	Illahassee Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Lakes Dental Medical Properties LLC		2001. **	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on lability Company)	our records.) 4024 AP	R 17 PH 1:35
The Articles of Organization for this Limited Liability Company of Florida document number L23000264040			_
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the design	nation "LLC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		_· - · · ·	
(Mailing address MAY BE A POST OFFICE BOX)			
			.
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our recor	rds, <u>enter the name</u>	of the new registere
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida s	street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my	duties, and I am far	niliar with and

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>	Name	Address	Type of Action
AMBR	Aslan Enterprises, LLC	200 W. 34th Ave., #977, Anchorage, AK 99503	= Add
			□ Remove
			□Change
MGR	Matthew Agnini	12114 Eagle Point Ct. Leesburg, FL 34788	□Add
			Remove
			□Change
			[] Add
			□Remove
			□Change
			🗆 Add
			🗆 Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

	information, enter change(s) here: (Attach additional sheets, if necessary,	,
		
		
		
		 _
V. CC and in the second		
Effective date, if other than (If an effective date is listed, the date	the date of filing:	
Note: If the date inserted in this document's effective date on the	the date of filing: c must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursu block does not meet the applicable statutory filing requirements, this date will not be partment of State's records.	uant to 605,0207 (
	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	
and in filed	at 12.01 d.m. On the partice of /10 mm	day at
ord is filed.	The 90th	day after the
liohana. 2		day after the
	2024	day after the
liohana. 2		day after the
liohana. 2	2024 ———————————————————————————————————	day after the
Dated February 7		uay after the

Filing Fee: \$25.00