## P00000096857

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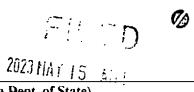
## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LASCHEID, DDS	AND RADER, DMD, P.A.				
DOCUMENT NUMI	BER: P00000096857					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corres	spondence concerning this ma	tter to the following:				
	David C. Tassell, Esq.					
	Name of Contact Person					
	Joseph C. Kempe PA					
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company				
	941 N A1A					
	Address					
	Jupiter, FL 33477					
		City/ State and Zip Code	2			
	dctassell@kempelaw.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information concerning this matter, please call:						
David C. Tassell		at ( <sup>561</sup>	747-7300			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## **Articles of Amendment** to **Articles of Incorporation** of



LASCHEID, DDS AND RADER, DMD, P.A.

(Name o	of Corporation as currently filed w	ith the Florida Dept. of State)		
P00000096857	200000096857 TALLAHASSI:			
	(Document Number of Corpor	ation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this <i>Florida</i> .	Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new n	ame of the corporation:			
Hobe Sound Dental Partners P.A.		The new		
	Corp," "Inc," or "Co". A profes:	" or "incorporated" or the abbreviation "Corp.," sional corporation name must contain the word		
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appl				
(Mailing address <u>MAY BE A POST</u>	<u> </u>			
D. If amending the registered agent at	ndlor registered office address in E	lowids, antar the name of the		
new registered agent and/or the ne		iorida, enter the name of the		
Name of New Registered Agent	Mathew D. Rader			
	10730 SOUTHEAST FEDERAL H	IIGHWAY		
	(Florida street addre	ss)		
New Registered Office Address:	HOBE SOUND	. Florida		
New Registered Office Hade ess.	(City)	(/ip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		accent the obligations of the position		
The day decept the appointment as logar		accept the oonganote of the pooliton.		
	WHIT			
	My			
	Signature of New Registered	l Agent, if changing		
Check if applicable	(			
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (e), F.S.			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT Jo	ohn Doe	
X Remove	<u>v</u> <u>n</u>	Aike Jones	
X Add	<u>sv</u> s	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	DR	Peter Lascheid JDDS	10730 SOUTHEAST FEDERAL H
Add			Hobe Sound, FL 33455
X Remove			······································
2) Change	P	Mathew D. Rader	10730 SOUTHEAST FEDERAL H
X Add			Hobe Sound, FL 33455
Remove 3) Change	S, T	Eric Faby	10730 SOUTHEAST FEDERAL F Hobe Sound, FL 33455
X Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			<del></del>
Remove			

E. If amending or adding additional Articles, enter change(s) here:		
(Attach additional sheets, if necessary). (Be specific)		
· · · · · · · · · · · · · · · · · · ·		
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		
provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)		

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date,	1
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareh	older action and shareholder
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the am flicient for approval.	endment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated3 Signature	122/23 Wathundton	
	rector, president or other officer – if directors or officers have i, by an incorporator – if in the hands of a receiver, trustee, or o	
	ed fiduciary by that fiduciary)	Juici court
	Mathew D. Rader	
	(Typed or printed name of person signing)	· · · <del>i · · · ·</del>
	President	
	(Title of person signing)	

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