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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

			S P .
NAME OF CORPORATION:	ARMILLA	ANTND	D. MID P.A
DOCUMENT NUMBER: P Ø	100001	<u>-307P</u>	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	·	
Please return all correspondence concerning this ma	atter to the following:		
Sh	amilla	<b>A</b>	
	Name of Contact Po	erson	
Shar	m'lla Firm/Company	Ancind	
142	O San	Marco	Blud
Jac	City/ State and Zip	C F L	32207
E-mail address: (to be t	nilla.a (	port notification)	il.com
For further information concerning this matter, plea	ase call:		
Showmilly Av	nund at (90	4 ) 403 a Code & Daytime T	6981 elephone Number
Enclosed is a check for the following amount made	payable to the Florida I	Department of State:	
□ \$35 Filing Fee   □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of	of Status opy Copy
Mailing Address	St	reet Address	
Amendment Section	Amendment Section		
Division of Corporations		vision of Corporation	ns
P.O. Box 6327 Tallahassee, FL 32314		ifton Building 61 Executive Center	Circle
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Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Sharmilla Huand D.M.D P.A
(Name of Corporation as currently filed with the Florida Dept. of State)
P Ø I Ø Ø Ø Ø B Ø B Ø
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
SMILES FOR THE WORLD P. A. The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  Jackson VIIIe
FL 32207
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  1838 Dewey Place  Tack sonville
FL 32207
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Shumilla Anand
(Florida street address)
New Registered Office Address: 1233 Drucy Planer (City) (Zip Code)  Jacksonville FL 32207
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

## 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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			NA
Remove			
2) Change			
Add Remove			NA
3) Change	<del></del>	<del></del>	
Add Remove			
4) Change		<del></del>	NA
Add Remove			
5) Change			NA
Add Remove			14/14
6) Change		<del> </del>	N/A
Add			<u> </u>
Remove			

•	ccessary). (Be specific)
	<u> </u>
	N A
<del> </del>	
f an amendment provides fo	or an exchange, reclassification, or cancellation of issued shares,
provisions for implementing	g the amendment if not contained in the amendment itself:
f an amendment provides for implementing (if not applicable, indicate)	g the amendment if not contained in the amendment itself:
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The date of each amendment(s) adoption: 10 14 2015 date this document was signed.	, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10 14  2013 Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	<del></del>
Sharmilla Anand	
(Typed or printed name of person signing)	
OWNER	
(Title of person signing)	