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#### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: PALMS DENTAL PA DOCUMENT NUMBER: \_ POIOGOG9506 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HEHTHER STOCK
Name of Contact Person PALMS DENTAL PA

Firm/ Company

93\( \text{93} \) FIRETHORN PL

Address

BLADENTON FL 342\( \text{93} \)

City/ State and Zip Code TRI FAMILY CREW @ GMAIL · COM
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HEATHER STOCK at (941) 447 5338

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### Articles of Amendment Articles of Incorporation of

## PALMS DENTAL PA (Name of Corporation as currently filed with the Florida Dept. of State)

The state of the s

PØI ØØØ Ø 95 Ø69 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

its Articles of Incorporation:			
A. If amending name, enter the new name o	of the corporation:		
CHRISTOPHER STOCK	( D.D.S. 1	IT PALMS DEN	TAL PA The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association.	the word "corporation i "Corp," "Inc," or "(	n," "company," or "incorpe Co". A professional corpore P.A."	orated" or the abbreviation attention name must contain the
B. Enter new principal office address, if ap		2006 MANG	ITEE AVE W
(Principal office address <u>MUST BE A STRE.</u>	ET ADDRESS )	BRADENTON	FL 34205
		-I	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		9303 FIRETH	TORN PL
		BRADENTON	FL 34202
D. If amending the registered agent and/or	registered office addr	ess in Florida, enter the nan	ne of the
new registered agent and/or the new reg			
Name of New Registered Agent	N/A		
	N/A	eet address)	
	(Florida stre	et address)	<del></del>
New Registered Office Address:	N/A		, Florida
	I	(City)	(Zip Code)
New Registered Agent's Signature, if chang	ing Registered Agent:		
I hereby accept the appointment as registered	agent. I am familiar w	rith and accept the obligation	s of the position,
	N/A		
	Signature of New Re	egistered 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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i)Change	<u> </u>		<del></del>
Add			
Remove			
2) Change			
Add	`		
Remove		N/A	
3 ) Change	<del></del>		
Add			
Remove			
4) Change			<del></del>
Add			
Remove			\
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
· ·	
N1/0	
N/A	
	· • • • • • • • • • • • • • • • • • • •
	<u></u>
·	
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)	
N/A	<del>_</del>
10/1+	

The date of each amendment(s) adoption:	10/1/2017	, if other than the
date this document was signed.		
Effective date if applicable:	10/1/2017	
•	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, tate's records.	this date will not be listed as the
Adoption of Amendment(s) (CHE)	CK ONE)	
The amendment(s) was/were adopted by the ship by the shareholders was/were sufficient for approximation.	areholders. The number of votes cast for the amend proval.	dment(s)
	shareholders through voting groups. The following stroup entitled to vote separately on the amendment(	
"The number of votes east for the amendr	ment(s) was/were sufficient for approval	
hy		
(votinį	g group)	
☐ The amendment(s) was/were adopted by the boaction was not required.	oard of directors without shareholder action and shareholder	rehold <del>e</del> r
☐ The amendment(s) was/were adopted by the incaction was not required.	corporators without shareholder action and shareholder	lder
Dated 16/1/26	17	
Signature Signature provide	ent or other officer - if directors or officers have no	
selected, by an incorp	porator – if in the hands of a receiver, trustee, or oth	t been er court
appointed fiduciary by		
CHRIS	TO PHER STOCK sped or printed name of person signing)	
(T <sub>3</sub>	yped or printed name of person signing)	
DP5	Т	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·