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04 NOV - 1 PM 2:36

STATE  
TALLAHASSEE, FLORIDA

Amended  
MD 11/9

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** DENTRICH DENTAL LAB, INC.

**DOCUMENT NUMBER:** P01000104175

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VIRGINIA M DISLA

(Name of Contact Person)

DEL ORBE & ASSOCIATES CORP

(Firm/ Company)

17120 ARVIDA PARKWAY 3

(Address)

WESTON FL 33326

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

VIRGINIA M DISLA

(Name of Contact Person)

at ( 305 ) 817-0814

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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  
409 E. Gaines Street  
Tallahassee, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

DENTRICH DENTAL LAB, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

P01000104175

(Document number of corporation (if known))

FILED  
04 NOV - 1 PM 2:36  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ADOPTED AMENDMENT TO ARTICLE V AS FOLLOWS: THE NEW REGISTERED AGENT IS:

VIRGINIA M. DISLA OF 7600 NW 186TH ST #A, MIAMI FL 33015 . SEE DOCUMENT ATTACHED

ARTICLE VII AS FOLLOWS:

THE OFFICER AND/OR DIRECTOR OF THE CORPORATION IS:

HANNIA REYES, OF 4250 E FOOTHILLS DR APT 1090G, SIERRA VISTA , AZ 85635

PRESIDENT/SECRETARY/TREASURER/DIRECTOR.

(Attach additional pages if necessary)

If an amendment provides for 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)

SHARES OWNERSHIP AS FOLLOWS:

HANNIA REYES - 100%

(continued)

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation:

**DENTRICH DENTAL LAB, INC.**

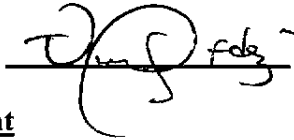
2. The name and address of the registered agent and office is:

**VIRGINIA M. DISLA**

(P.O. BOX NOT ACCEPTABLE)

**7600 NW 186<sup>TH</sup> ST #A  
Miami, FL 33015**

SIGNATURE



TITLE: Agent

DATE October 25, 2004

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE



DATE October 25, 2004

The date of each amendment(s) adoption: 10/25/2004

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

- ☐ The amendment(s) was/were approved 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.

Signed this 25 day of OCTOBER, 2004

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)

\_\_\_\_\_  
RAFAEL SANTRICH

(Typed or printed name of person signing)

\_\_\_\_\_  
DIRECTOR

(Title of person signing)

**FILING FEE: \$35**