## 02000001371

(Red	questor's Name)	
(Add	lress)	
(Add	lress)	
(City	/State/Zip/Phone	<i>; #</i> )
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



900041943139

10/22/04--01054--017 \*\*35.00

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: FRANCIS C	2. CHANEY D.M.D. P.A.
DOCUMENT NUMBER: POZOOOO/	371
The enclosed Articles of Amendment and fee are subm	itted for filing.
Please return all correspondence concerning this matter	to the following:
Coey Coucy (Name of Contact	Person)
FRANCIS C. CHANCY (Firm/Comp	D.M.D. P.A.
1318 C. GTH AVIE (Address)	
TALLAHASSEE FL (City/ State/ and 2	32303 (ip Code)
For further information concerning this matter, please of	all:
(Name of Contact Person) at	(850) 877-0215 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status	A3.75 Filing Fee &  Certified Copy (Additional copy is enclosed)  Additional Copy is enclosed)  S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations 409 E. Gaines Street

Tallahassee, FL 32399

Tallahassee, FL 32314

## Articles of Amendment to Articles of Incorporation of

	D A T A MAAATTI
	(Document number of corporation (if known)
Darmorre	
	ant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> s the following amendment(s) to its Articles of Incorporation:
NEW	CORPORATE NAME (if changing):
	contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") fessional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A."
	NDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s
	r Article Title(s) being amended, added or deleted: (BE SPECIFIC)
77 Y	Den OFFICER: CORY L. Couch D.M.D. as
	VICIE PRIESIBIENT
*******	
	939 E JEFFERSON ST TOLLAHASSIEE, FL 32301ES
	(850) 222 - 7564
	TE OF
	7.7.7. 1.1.5.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
<del></del>	, m ,
	(Attach additional pages if necessary)
If on o	amendment provides for exchange, reclassification, or cancellation of issued shares, provision
	amendment provides for exchange, reclassification, or cancentation of issued shares, provise aplementing the amendment if not contained in the amendment itself: (if not applicable, indicate

(continued)

The date of each amendment(s) adoption: 10-21-04
Effective date if applicable: (0-21-04 (no more than 90 days after amendment file date)
(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 71 St day of Oct. 2004.
Signature Frank C. Cherry D. A.D.  (By a director, president or other officer - if threctors or officers have not been
(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)
FRANCISC. CHANKY D.M.D.
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35