

P03000143810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

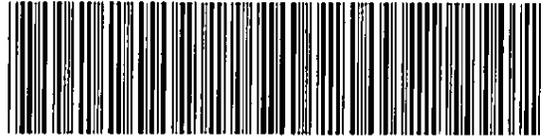
(Business Entity Name)

(Document Number)

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2024 JAN 16 PM 4:06
CLERK OF SUPERIOR COURT
STATE OF OHIO

AB

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Groomes And Friedman, P.A.
DOCUMENT NUMBER: P03000143810

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

Please return all correspondence concerning this matter to the following:

Rebecca F. Groomes, DDS
Name of Contact Person
Groomes And Friedman, P.A.
Firm/ Company
37149 Florida Avenue
Address
Dade City, FL 33525
City/ State and Zip Code
Friedmanandgroomes@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca Groomes, DDS at (352) 567-2997
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:

- \$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

Groomes And Friedman, P.A.

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

P03000143810

(Document Number of Corporation (if known))

FILED

JAN 16 PM 4:06

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 of the corporation:

Groomes Dental, 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**)

37149 Florida Avenue
Dade City, FL 33525

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

N/A (SAME AS ABOVE)

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 N/A (SAME AS CURRENTLY IN FILE)

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

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.

N/A

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

Example:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change		<u>DDS/DR. DAVID W. FRIEDMAN</u>	<u>11940 JUST-A-MERE LN</u>
<input type="checkbox"/> Add			<u>DADE CITY, FL 33525</u>
<input checked="" type="checkbox"/> Remove		<u>DAVID IS LEAVING THE P.A.</u>	
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add			_____
<input type="checkbox"/> Remove			_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

N/A

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)

N/A

The date of each amendment(s) adoption: 1-10-2024, if other than the date this document was signed.

Effective date if applicable: 1-10-2024
(no more than 90 days after amendment file date)

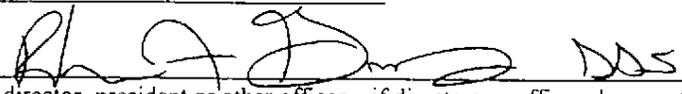
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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)

x Dated 1-10-24

x Signature  DDS
(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)

Rebecca F. Groomes, DDS
(Typed or printed name of person signing)

DDS / OWNER / president
(Title of person signing)



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Detail by Entity Name

Florida Profit Corporation
GROOMES AND FRIEDMAN, P.A.

Filing Information

Document Number	P03000143810
FEI/EIN Number	20-0525818
Date Filed	12/02/2003
State	FL
Status	ACTIVE
Last Event	AMENDMENT AND NAME CHANGE
Event Date Filed	07/29/2019
Event Effective Date	NONE

*FORM ATTACHED
TO CHANGE
CURRENT BUSINESS
NAME.*

Principal Address

37149 FLORIDA AVE
DADE CITY, FL 33525

Mailing Address

37149 FLORIDA AVE
DADE CITY, FL 33525

Registered Agent Name & Address

JOHNSON, LEONARD H
401 E. Jackson Street
2400
Tampa, FL 33602

Address Changed: 02/18/2022

Officer/Director Detail

Name & Address

Title DDS

FRIEDMAN, DAVID W, Dr.
11940 JUSTAMERE LN
DADE CITY, FL 33525

Title DDS

GROÖMES, REBÉCCA F, Dr.
12503 Curley Street
SAN ANTONIO, FL 33576

Annual Reports

Report Year	Filed Date
2021	02/04/2021
2022	02/18/2022
2023	01/19/2023

Document Images

01/19/2023 -- ANNUAL REPORT	View image in PDF format
02/18/2022 -- ANNUAL REPORT	View image in PDF format
02/04/2021 -- ANNUAL REPORT	View image in PDF format
01/24/2020 -- ANNUAL REPORT	View image in PDF format
07/29/2019 -- Amendment and Name Change	View image in PDF format
04/03/2019 -- ANNUAL REPORT	View image in PDF format
01/12/2018 -- ANNUAL REPORT	View image in PDF format
02/09/2017 -- ANNUAL REPORT	View image in PDF format
02/14/2016 -- ANNUAL REPORT	View image in PDF format
02/26/2015 -- ANNUAL REPORT	View image in PDF format
03/13/2014 -- ANNUAL REPORT	View image in PDF format
03/27/2013 -- ANNUAL REPORT	View image in PDF format
02/16/2012 -- ANNUAL REPORT	View image in PDF format
01/20/2011 -- ANNUAL REPORT	View image in PDF format
03/24/2010 -- ANNUAL REPORT	View image in PDF format
01/15/2009 -- ANNUAL REPORT	View image in PDF format
01/14/2008 -- ANNUAL REPORT	View image in PDF format
02/15/2007 -- ANNUAL REPORT	View image in PDF format
03/09/2006 -- ANNUAL REPORT	View image in PDF format
04/01/2005 -- ANNUAL REPORT	View image in PDF format
04/26/2004 -- ANNUAL REPORT	View image in PDF format
12/02/2003 -- Domestic Profit	View image in PDF format

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Firm/ Company
37149 Florida Avenue
Address
Dade City, FL 33525
City/ State and Zip Code
Friedmanandgroomes@yahoo.com
E-mail address: (to be used for future annual report notification)

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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
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Tallahassee, FL 32303

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(Principal office address MUST BE A STREET ADDRESS)

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Dade City, FL 33525

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(Mailing address MAY BE A POST OFFICE BOX)

N/A (SAME AS ABOVE)

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(Florida street address)

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Type of Action
(Check One)

Title

Name

Address

- | | | |
|--|--|---|
| 1) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input checked="" type="checkbox"/> Remove | <u>DDS/DR. DAVID W. FRIEDMAN</u>

<u>DAVID IS LEAVING THE P.A.</u> | <u>11940 JUST-A-MERE LN</u>
<u>DADE CITY, FL 33525</u> |
| 2) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ |
| 3) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ |
| 4) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ |
| 5) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ |
| 6) <input type="checkbox"/> Change
<input type="checkbox"/> Add
<input type="checkbox"/> Remove | _____ | _____ |

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"The number of votes cast for the amendment(s) was/were sufficient for approval
by _____"
(voting group)

x Dated 1-10-24

x Signature [Handwritten Signature] DDS
(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)

Rebecca F. Groomes, DDS
(Typed or printed name of person signing)

DDS / OWNER / president
(Title of person signing)