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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335

Phone : (305)599-0839 Fax Number : (305)716-0346

SCOR AMND/RESTATE/CORRECT OR O/D RESIGN

HOLLYWOOD DENTISTRY, P.A.

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Corporate Filing Menu

2/21/2007

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ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION

Hollywood Dentistry, P.A. Doe #P04000035607

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts to following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted:

Article I - Please change name to: Enchanting Deutistry, PA Article V - Please change Registered Agent to Tom Andrews, 9 SW 13th Street, Ft. Lauderdale, FL 33315

SECOND: 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, are as follows:

THIRD: The date of each amendment's adoption: 02/20/07

FOURTH: Adoption of Amendment(s) (CHECK ONE)

٥	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
0	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.
Q.	The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.
	Signed this 21th day of February 2007
Sio	mature A

OR

By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Annette Middletrof
Typed or printed name

l, Tom Andrews accept all responsibilities and duties as registered agent:

Signature