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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	D.D.S., P.A.				
DOCUMENT NUME	P0J0000782J2					
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.				
Please return all corres	pondence concerning this ma	nter to the following:				
	Ritu Airan Mauskar, Esq.					
	Name of Comact Person					
	Stokes McMillan Antunez P.A.					
	Firm/ Company					
	9130 S. Dadeland Boulevard, Suite 1901					
		Address				
	Miami, Florida 33156					
•		City/ State and Zip Cod	e			
For further information	concerning this matter, pleas					
Yasının Mendez		at (597-3492)			
Name o	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:			
S35 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)			
Ame Divis P.O.	ing Address indigent Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, F1, 32301			

Articles of Amendment to Articles of Incorporation of

Jocelyn Mendez, D.D.S., P.A. (Name of Corporation as currently filed with the Florida Dept. of State) P04000078242 (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 of the corporation: 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 <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Yasmin Mendez Name of New Registered Agent OOK AVEOUR (Florida street address) New Registered Office Address: \(\int \lambda (City) 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. Signature of New Registered 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

Example: \underline{X} Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1)Change	PSTD	Jocelyn Mendez, D.D.S.	2820 Oak Avenue		
Add X Remove			Miami, F1, 33133		
2) Change	STD	Yasmin Mendez	2820 Oak Avenue		
X Add			Miami, FL 33133		
Remove					
3)Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

<u>If amendir</u>	g or adding additional Articles, enter change(s) here:
Attach <i>ada</i>	itional sheets, if necessary). (Be specific)
-	
16	dment provides for an exchange, reclassification, or cancellation of issued shares,
manifican	s for implementing the amendment if not contained in the amendment itself:
Drovision	applicable, indicate N A)
(i) no	appreume, macate 8.83

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"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 sharehold action was not required.	er
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
(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 cou appointed fiduciary by that fiduciary)	ırt
Yasmin Mendez (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	