Poyassis 99

| (Requestor's Name) | | | |
|---|--|--|--|
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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11/26/18--01031--007 **43.75



R. WHITE DEC 0 3 2018

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: PRO D | ENTS INC | | |
|--|---|--|--|
| DOCUMENT NUMBER: P040000 | 83639 | | |
| The enclosed Articles of Amendment and fee are | submitted for filing. | | |
| Please return all correspondence concerning this | matter to the following: | | |
| CATHY | FISHER | | |
| | Name of Contact Person | | |
| PRO D | FISHER Name of Contact Person ENTS INC Firm/ Company | | |
| | Firm/ Company | | |
| 3708 | PANOLA DRIVE Address RT RICHEY FL 34652 Cityl State and Zip Code | | |
| | Address | | |
| NEW PO | RT RICHEY FL 34652 | | |
| | City/ State and Zip Code | | |
| • | | | |
| E mail address (t. b. | used for future annual report notification) | | |
| E-mail address: (to be | e used for future annual report nonneation) | | |
| For further information concerning this matter, pl | each call. | | |
| To further information concerning this matter, pr | , | | |
| Cathy Fisher | at (727), 271-5009 Area Code & Daytime Telephone Number | | |
| Name of Contact Person | Area Code & Daytime Telephone Number | | |
| Enclosed is a check for the following amount made | de payable to the Florida Department of State: | | |
| ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status | | | |
| Mailing Address | Street Address | | |
| Amendment Section | Amendment Section | | |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building | | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 2018 NOV-26 PH 4: 22

| PRO DENTS INC. (Name of Corporation as current | SECRET. PH 4: 23 |
|--|--|
| (Name of Corporation as current | the filed with the Florida Dept of State |
| Po 4000083639 (Document Number of | SEE, FL |
| (Document Number of | of Corporation (if known) |
| rsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation: | s Florida Profit Corporation adopts the following amendment . |
| If amending name, enter the new name of the corporation: | |
| • | The new |
| me must be distinguishable and contain the word "corporation", "Inc.," or Co.," or the designation "Corp." "Inc." or or ord "chartered," "professional association," or the abbreviation | ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A." |
| Enter new principal office address, if applicable: | 3708 Panola DRIVE |
| rincipal office address <u>MUST BE A STREET ADDRESS</u>) | 3708 Panola DRIVE NEW PORT RICHEYEL |
| | 34652 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 3708 PANOLA DRIVE NEW PORT RICHEY PL |
| | NEW PORT RICHEY FL |
| | 34652 |
| | |
| If amending the registered agent and/or registered office add | |
| new registered agent and/or the new registered office addres | <u>ss:</u> . |
| Name of New Registered Agent | |
| | |
| . (Florida s | street address) |
| New Registered Office Address: | |
| | (City) (Zip Code) |
| | |
| ew Registered Agent's Signature, if changing Registered Agen | nt. |
| nereby accept the appointment as registered agent. I am familiar | |
| | • |
| | |
| | |
| | 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: X_Change | <u>PT</u> <u>Joh</u> r | n Doe | |
|-------------------------------|------------------------|-------------------|---------------------------------------|
| X Remove | <u>V</u> <u>Mik</u> | te Jones | • |
| X Add | <u>SV</u> <u>Sall</u> | y Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1) Change | T | CHARLES FISHER JR | 0 11123 169Th WAG |
| X _ Add | | | LARGO FL 33778 |
| Remove | | | |
| 2) Change | | | |
| Add | | • | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | • | |
| Remove | | | |
| 5) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | <u> </u> |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| E. If amending or adding additional Articles, ente (Attach additional sheets, if necessary). (Be specified) | | | | |
|---|----------------|--|--|--------------|
| Pro Dents INC 15 am | sendina | the C | orperation | , |
| | Chil | Ful | To as | |
| Articles to include | Crarles | 1 1 <u>5 1 e r</u> | 07. αs | <u>u</u> |
| 13 partner effective | Novem | ber /- | 2018. | |
| The shares will be | <u>e. /3 c</u> | ach t | o Charles | tisher, |
| Articles to include 1/3 partner effective The shares will be Cathy Fisher and | Charles | Fisher | Ir. | |
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| F. If an amendment provides for an exchange, recognitions for implementing the amendment i | | | | ŧ |
| (if not applicable, indicate N/A) | | | | |
| N/A | | | ······································ | |
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| The date of each amendment(s) adoption: November 1st 2018 | _, if other than the |
|--|----------------------|
| date this document was signed. | |
| Effective date if applicable: | |
| (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 document's effective date on the Department of State's records. | not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| 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) | |
| ☐ 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. | |
| • Dated | |
| | |
| • 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) | , |
| Charles : TEISher | |
| (Typed or printed name of person signing) | |
| · President | |
| (Title of person signing) | |