## P07000003694

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP MAIT MAIL	• .
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(Business Entity Name)	,
(Document Number)	
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	
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r ILEL SECRETARY OF STAIL VISION OF CORPORATIONS

Amend + N.C. C.COULLIETTE NOV 18 2009

**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Dental Goluctions Services, Inc.
DOCUMENT NUMBER: P0700003694
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Wender Paquette Name of Contact Person
Dental Employer Services Inc.
4326 Park Boulevard Suite C-West
Pinellas Park H 33781  City/State and Zip Code
E-mail address: (1) be used for future annual report totification)
For further information concerning this matter, please call:
Wendy Poquette at (727) 547,-1683  Name of Confact Person at (727) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address Amendment Section Division of Corporations Clifton Building - 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2009

WENDY PAQUETTE DENTAL SOLUTION SERVICES, INC. 4326 PARK BLVD., STE C-WEST PINELLAS PARK, FL 33781

SUBJECT: DENTAL SOLUTION SERVICES, INC.

Ref. Number: P07000003694

We have received your document for DENTAL SOLUTION SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 209A00035136

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ત્રી પાક્રોમાર્ટ સરકારી કરોઇ જ ૦૦ ડી અને છાણ ૧૦ માટે આવતન નાં મુક્કાર્ટ છે સ્ટ

## **Articles of Amendment**

. to ,
Articles of Incorporation

of	
Name of Corporation as currently filed with the Florida Dept. of State)	
P0700003694	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopted amendment(s) to its Articles of Incorporation:	s the following
name must be distinguishable and contain the word "corporation," "company," or "incorporated abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional co	
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)	
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	SECRETARY OF STATE STATE OF CORPORATION OF CORPORAT
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	<u>e</u> 👼
new registered agent and/or the new registered office address:  Name of New Registered Agent:  43212 Park Run & - WEST	-
New Registered Office Address:  (Florida street address)  Pinellas Park FL, Florida (City)  (Zip Code)	78/
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	

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Title Name Addre		☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add
		☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add
		☐ Remove ☐ Add ☐ Remove ☐ Add
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	s) here:	
E. If amending or adding additional Articles, enter change(s (attach additional sheets, if necessary). (Be specific)		
F. If an amendment provides for an exchange, reclassificate provisions for implementing the amendment if not conta (if not applicable, indicate N/A)	ion, or cancellation of issue ined in the amendment itse	d shares, elf:

The date of each amendment	
Effective date <u>if applicable</u> :	(date of adoption is required)
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	11-1-09 1110 - 1 P + PA
Signature	a director, president of other officer - if directors or officers have not been
sele	cted, by an incorporator—if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
•	Wendy Paquette
	(Typed or printed name of person signing)
	(Title of person signing)