PD7100055542

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PANF, P.A.		·	
DOCUMENT NUMBER: P07000055542				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corr	espondence concerning this ma	tter to the follo	wing:	
	Sandra Canada			
		Name of Co	ntact Persor	1
	Smith, Thompson, et al			
		Firm/ C	Company	
	3520 Thomasville Road, 4th	Floor		
		Ado	iress	
	Tallahassee, Florida 32309			
		City/ State a	ind Zip Code	•
	sandrac@stslaw.com			
	E-mail address: (to be us	sed for future a	nnual report	notification)
For further informati	on concerning this matter, pleas		850	893-4105
	e of Contact Person	at (de & Daytime Telephone Number
	for the following amount made	payable to the l		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Fil Certified C (Additional enclosed)	Сору	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.0	ailing Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Amend Division The Co 2415 To	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

POTO00055542 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: SMILE MANAGEMENT AND CONSULTANTS, PA 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) C. Enter new mailing address MUST BE A STREET ADDRESS) 2160 Capital Circle NE 2160 Capital Circle NE	(<u>Name o</u>	f Corporation as currently	filed with the Florida Dept. of State)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: SMILE MANAGEMENT AND CONSULTANTS, PA 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) Suite 202 Tallahassee, Florida 32308 T. Suite 202 Tallahassee, Florida 32308 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 Andrew J. Power 3520 Thomasville Road, 4th Floor	P07000055542				
A. If amending name, enter the new name of the corporation: SMILE MANAGEMENT AND CONSULTANTS, PA The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," 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) 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: Name of New Registered Agent Andrew J. Power 3520 Thomasville Road, 4th Floor		(Document Number of	Corporation (if known)		
SMILE MANAGEMENT AND CONSULTANTS, PA 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) Suite 202 Tallahassee, Florida 32308 T. Suite 202 Tallahassee, Florida 32308 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 Andrew J. Power 3520 Thomasville Road, 4th Floor		1006, Florida Statutes, this I	Florida Profit Corporation adopts the following	g amendmer	nt(s) t
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"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) Suite 202 Tallahassee, Florida 32308 T.: C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Suite 202 Tallahassee, Florida 32308 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 Andrew J. Power 3520 Thomasville Road, 4th Floor	SMILE MANAGEMENT AND CONSU	LTANTS, PA		The new	
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C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Tallahassee, Florida 32308 Tallahassee, Florida 32308 Suite 202 Tallahassee, Florida 32308 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 Andrew J. Power 3520 Thomasville Road, 4th Floor	R Enter new principal office address	if annlicable:	2160 Capital Circle NE		;
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Suite 202 Tallahassee, Florida 32308 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 Andrew J. Power 3520 Thomasville Road, 4th Floor			Suite 202		. •
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 3520 Thomasville Road, 4th Floor			Tallahassee, Florida 32308	<u>π.</u>	, :
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Name of New Registered Agent 3520 Thomasville Road, 4th Floor			Tallahassee, Florida 32308		
Name of New Registered Agent 3520 Thomasville Road, 4th Floor					
	Name of New Registered Agent	Andrew J. Power		_	
		3520 Thomasville Road, 4t	h Floor		
(Florida street address)		(Florida str	eet address)	_	
New Registered Office Address: Tallahassee , Florida 32309		Tallahassce	, Florida		
(City) (Zip Code)	New Registered Office Address:		(Cin)	Code)	
			·		
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if c	hanging Registered Agent:	· ·		
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if c	hanging Registered Agent:	· ·		
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	New Registered Agent's Signature, if c	hanging Registered Agent:	· ·		

Check if applicable

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

Example:

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.

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
l) Change		_	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u></u>	
Add			
Remove			
6) Change			
Add			
Remove			

	y). (Be specific)
· · · · · · · · · · · · · · · · · · ·	
I an amendment provides for an expressions for implementing the a	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:
(if not applicable, indicate N/A))
	

	ndment(s) adoption:	, if other than
date this document was	signed.	
Effective date if applie	cable:	
	(no more than 90 days after amendment file date)	
	rted in this block does not meet the applicable statutory filing requirements, thin ate on the Department of State's records.	s date will not be listed as
Adoption of Amendm	ent(s) (<u>CHECK ONE</u>)	
■ The amendment(s) v action was not requi	was/were adopted by the incorporators, or board of directors without shareholder red.	action and shareholder
	was/were adopted by the shareholders. The number of votes east for the amendm was/were sufficient for approval.	ent(s)
	was/were approved by the shareholders through voting groups. The following staprovided for each voting group entitled to vote separately on the amendment(s):	tement
"The number of	of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
Dated Signa	12/15/21 sture_b/alth 4 W	
Č	(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
	WALTER E. COLON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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