P07000097284

•				
(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(, , ,				
DIRECTOR DIVERT DIME				
PICK-UP WAIT MAIL				
(Dusiness Eskib. Normal)				
(Business Entity Name)				
(Document Number)				
(200411011111111111111111111111111111111				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
·				

Office Use Only



600187746576



11/29/10--01021--004 **35.00

FILED
2010 NOV 29 AM 99: 37
SECRETARY OF STATE
SECRETARY OF STATE

12/1/20

Brown Commencer of the same

ICARDI & ICARDI, P.A. 549 Wymore Road, North, Ste. 109 Maitland, FL 32751 407-647-1859 Fax: 407-647-3224

Transmittal Memorandum

Date: November 24, 2010

TO:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: PRECISION DENTAL, P.A.

SUBJECT:

Enclosed are a Cover Letter, Amended Articles of Administration and a check in the amount of \$35.00 for the above cited corporation.

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORE	PORATION:	Precision Dental, P.A.	
DOCUMENT NU	MBER:	P07000097284	
The enclosed Artic	eles of Amendment and fee ar	re submitted for filing.	
Please return all co	orrespondence concerning this	s matter to the following:	
		Jeffrey A. Icardi	
	Na	ame of Contact Person	
		ardi & Icardi, PA	
		Firm/ Company	
	549 Wym	ore Road North, Ste. 109	
		Address	
	M	aitland, FL 32751	
	Ci	ty/ State and Zip Code	
_	jeff(E-mail address: (to be used	@icardi.com I for future annual report notification)	
For further informa	ation concerning this matter, p	please call:	
<u>J</u>	effrey A. Icardi	at (<u>407</u>) <u>647</u> Area Code & Daytime Telep	'-1859
Name	of Contact Person	Area Code & Daytime Telep	hone Number
Enclosed is a check	k for the following amount m	ade payable to the Florida Departm	ent of State:
✓ \$35 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)
Mailing Ac Amendmen Division of P.O. Box 6 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



Precision Dental, P.A.

2010 NOV 29 AH 9: 37

(Name of Corporation as currently filed with the Florida Dept. of Sygten ETARY OF STATE TALLAHASSEE, FLORIDA ... P07000097284 (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 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: New Registered Office Address: (Florida street address) _, Florida_ (City) (Zip Code) 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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
·			
			Remove
(attach a Article III "Shares	of the corporation's stock a	(Be specific) oh C is amended to read as foll nd certificates shall be issued o	only to dentists in
good sta	nding and duly licensed or	otherwise duly authorized within	n the State of Florida
to render	r the same professional ser	vices as this corporation."	
		·	
			
provis	mendment provides for an excions for implementing the amenta applicable, indicate N/A)	hange, reclassification, or cancellat ndment if not contained in the ame	ion of issued shares, ndment itself:
			· · · · · · · · · · · · · · · · · · ·

The date of each amendmen	nt(s) adoption: NOVEMBER 5, 2010 (date of adoption is required)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
· · · · · · · · · · · · · · · · · ·	were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	vere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	·
	(voting group)
action was not required.	vere adopted by the board of directors without shareholder action and shareholder vere adopted by the incorporators without shareholder action and shareholder
Dated_No	vember 5, 2010
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	D. Ravi Lall
	(Typed or printed name of person signing)
	Director
	(Title of person signing)