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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION:	HEATH BROOK DENTA	AL, P.A
DOCUMENT NUME	BER:	P07000012440	08
The enclosed Articles	of Amendment and fee a	re submitted for filing.	
Please return all corres	pondence concerning thi	s matter to the following:	
	RC	BERT L. PENROD	
••	N	ame of Contact Person	
	HEATH	BROOK DENTAL, P.A.	
		Firm/ Company	
	2130 S	W 22nd Place, Ste. 102	· · · · · · · · · · · · · · · · · · ·
		Address	:
		CALA, FL 34471 ity/ State and Zip Code	1
	PAULA@ADA	MSCOMPANYPA.COM	
	E-mail address: (to be use	d for future annual report notification)
For further information	n concerning this matter,	please call:	•
JOHN Q. ADAMS II, CPA		at (352)	237-3200
Name of C	ontact Person	Area Code & Daytime	Telephone Number
Enclosed is a check for	the following amount m	nade payable to the Florida Dep	partment of State:
✓ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FI	ction rporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

HEATH BROOK DENTAL, P.A.

~ €. ■	to	ment '	
•	Articles of Incorpor	ation	
	of	*	:
HEATH R	ROOK DENTAL, F	ο Λ	- 10 JUN 21 PM 3.
(Name of Corporation as cu			10 JIM
		oriua Dept. or State)	1 PM
	07000124408		TARRIAN 7 3
(Document N	lumber of Corporation (if	known)	SSEE. F.STA
rsuant to the provisions of section 607.1 tendment(s) to its Articles of Incorporation		is <i>Florida Profit Corp</i>	· San
If amending name, enter the new name	of the corporation:		
	-		_ .
me must be distinguishable and contai	.1 1 1	1) () 11	The new
Enter new principal office address, if a rincipal office address MUST BE A STR	-		
	••	· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if application	alo:		
(Mailing address MAY BE A POST OF		;	
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If amending the registered agent and/o			e name of the
new registered agent and/or the new r	egisterea office address:		
Name of New Registered Agent:	ROBERT L. PENI	ROD	
	5160 SE 47TH C	OURT ROAD	
New Registered Office Address:		reet address)	
	OCALA	· .	24400
	(City)	, Fl	orida <u>34480</u>
	(Cily)	(Zip Coi	16 <i>)</i>
ew Registered Agent's Signature, if char			
nereby accept the appointment as registere	d agent. I am familiar w	ith and accept the oblig	gations of the position.
-		14	

Signature of New Registered Agent, if changing

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title Name Address **Type of Action** BEN M. SPIVEY 1815 SW 29TH STREET ☐ Add **PVST** ROBERT L. PENROD 5160 SE 47TH COURT ROAD ☑ Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

If amanding the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendmen	t(s) adoption: JUNE 18, 2010	_ !
Effective date if applicable:	t(s) adoption: JUNE 18, 2010 JUNE 18, 2010 (date of adoption is required)	:
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	•
	ere adopted by the shareholders. The number of vote tere sufficient for approval.	s cast for the amendment(s)
	ere approved by the shareholders through voting groued for each voting group entitled to vote separately o	
"The number of votes	cast for the amendment(s) was/were sufficient for ap	pproval
by	,,,	
,	(voting group)	
action was not required.	ere adopted by the board of directors without shareho	
action was not required.		
Dated	18-10	
Signature _		
sel	y a director, president or other officer — if directors of ected, by an incorporator — if in the hands of a receive pointed fiduciary by that fiduciary)	
	ROBERT L. PENROD	
	(Typed or printed name of person sign	ing)
	PRESIDENT	
	(Title of person signing)	-