

P08000034042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

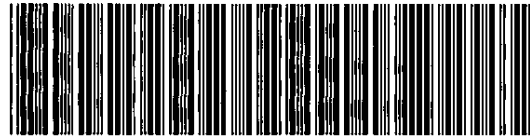
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600182328966

06/21/10--01042--004 **35.00

FILED
10 AUG 11 AM 6:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C AMEND
08/2/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2010

ROBERT L. PENROD
CANOPY OAK MODERN DENTISTRY, P.A.
8075 SW HWY 200, STE 114
OCALA, FL 34481

SUBJECT: CANOPY OAK MODERN DENTISTRY, P.A.
Ref. Number: P08000034042

We have received your document for CANOPY OAK MODERN DENTISTRY, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

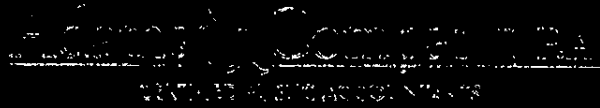
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 210A00015416



JOHN Q. ADAMS II
Certified Public Accountant

VANESSA L. KING
Enrolled Agent

August 5, 2010

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Article of Amendment for P08000034042
Canopy Oak Modern Dentistry, P.A.

To Whom It May Concern:

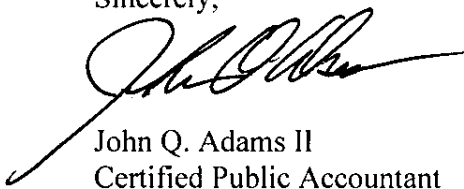
Enclosed please find a resubmission of the Articles of ^{Certified} Amendment for the above mentioned entity.

The filing was returned as a check box needed to be completed under the section "Adoption of Amendment". This is now done.

Please know the check payment for the processing of the attached Amendment was received by the Division of Corporations and cashed so the fee is on account for this entity to now complete the filing.

Thank you for your assistance and please call me should there be any questions.

Sincerely,



John Q. Adams II
Certified Public Accountant

JQA/pja
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CANOPY OAK MODERN DENTISTRY, P.A.

DOCUMENT NUMBER: P08000034042

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT L. PENROD

Name of Contact Person

CANOPY OAK MODERN DENTISTRY, P.A.

Firm/ Company

8075 SW HWY. 200, STE. 114

Address

OCALA, FL 34481

City/ State and Zip Code

PAULA@ADAMSCOMPANYPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN Q. ADAMS II, CPA

Name of Contact Person

at (352)

237-320

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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 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

Articles of Amendment
to
Articles of Incorporation
of

CANOPY OAK MODERN DENTISTRY, P.A.

(Name of Corporation as currently filed with the Florida Dept. of State)

P08000034042

(Document Number of Corporation (if known))

FILED
10 AUG 11 AM 6:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

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, 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:

ROBERT L. PENROD

New Registered Office Address:

5160 SE 47TH COURT ROAD

(Florida street address)

OCALA

(City)

, Florida 34480

(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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PVST	BEN M. SPIVEY	1815 SW 29TH STREET OCALA, FL 34471	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
PVST	ROBERT L. PENROD	5160 SE 47TH COURT ROAD OCALA, FL 34480	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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)

The date of each amendment(s) adoption: JUNE 18, 2010
(date of adoption is required)
Effective date if applicable: JUNE 18, 2010
(no more than 90 days after amendment file date)

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 6-18-10

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)

ROBERT L. PENROD
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)