P0900052031

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2018 MAY 25 PH 12: 06
SECRETARY OF STATE

C. GOLDEN MAY 29 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: New Image Dentis	try on Minton, Inc.		
DOCUMENT NUM	P09000052031	_		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	ner to the following:		
	Brian K. Kim			
		Name of Contact Person	1	
	Dickinson Wright, PLLC			
		Firm/ Company		
	150 E. Gay Street, Suite 240	• •		
		Address		
	Columbus, OH 43215			
		City/ State and Zip Cod	<u>. </u>	
	E-mail address: (to be u	sed for future annual report	notification)	
For further informatic	on concerning this matter, pleas	se call:		
		at (de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
<u></u>	_			
\$35 Filing Fee	□\$43.75 Filling Fee & Certificate of Status	□\$43.75 Filing Fee &	□\$52,50 Filing Fee Certificate of Status	
, ,	Certificate of Status	Certified Copy (Additional copy is	Certified Copy	
		enclosed)	(Additional Copy	
			is enclosed)	
Ma	iling Address	Street	Address	
Amendment Section		Street Address Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 MAY 25 PM 12: 06

New Image Dentistry on Minton, Inc.	CCODETION of An
(Name of Corporation as cur	rently filed with the Florida Dept. of Stage 1 ANASSEE FLOR
P09000052031	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Fforida Statutes, its Articles of Incorporation;	, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporatio	<u>n:</u>
MM on Minton, Inc.	The new
	vation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office ad	
Name of New Registered Agent	
t Flor	ida street address)
New Registered Office Address:	Florida
	(Cuy) (Zip Code)
New Registered Agent's Signature, if changing Registered A liberary accept the appointment as registered agent. I am fam	<u>Agent:</u> villiar 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)

Please note the officer director title by the first letter of the office title:

P. President, V. Fice 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.

Evample: X Change	<u>PT</u>	<u>John Do</u>	<u>u</u>			
X Remove	\underline{V}	Mike Jo	<u>nes</u>			
\underline{X} Add	<u>sv</u>	Sally Sm	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name		<u>Add</u>	ress
1) Change		_				
Add						
Remove						
2) (hange		_	_	<u> </u>		
Add						
Remove						
3 i Change		_	****			
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change						
Add		_				
Remove						
6) Change			·			
Add					-	
Remove						

f 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.1)	Mttach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate NA)	provisions for implementing the ame	ndment if not contained in the amendment itself:
	(if not applicable, indicate NA)	

	May 18, 2018	
The date of each amendment(s) date this document was signed.	adoption:	il other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this d Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	idopted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
May 21. Dated Signature	MISMA	
(By a selection)	a director, president or other other—if directors or officers have not been ated, by an incorporator—if in the hands of a receiver, trustee, or other countried fiduciary by that fiduciary)	
	Mohammed Mujeeb	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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