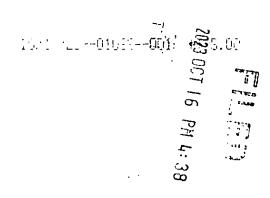
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: KEEP SMILING D	DENTAL PA	
	MBER: P09000066157		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	LAURA G. HABNER D.M.I).	
		Name of Contact Persor	1
	KEEP SMILING DENTAL F	PA .	
		Firm/ Company	
	2557 NURSERY ROAD SUI	• •	
		Address	
	CLEARWATER FL 33764		
		City/ State and Zip Code	e
	drLaura@keepsmilingdental.	com	
	E-mail address: (to be us	sed for future annual report	notification)
	ion concerning this matter, pleas	se call:	
LAURA G. HABNI	ER D.M.D.	at (
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Division The Co 2415 f	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303

Articles of Amendment to Articles of Incorporation of

KEEP SMILING DENTAL PA

(Name of Corporati	on as currently filed with the Florida	Dept. of State)	
P09000066157			
(Docun	nent Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporatio</i>	on adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "co "Inc.," or Co" or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional corporation		on "Corp.,"
B. Enter new principal office address, if applicable			
(Principal office address <u>MUST BE A STREET ADL</u>	DRESS)	1	2
		· · · · · · · · · · · · · · · · · · ·	- 83 -
		· · · · · · · · · · · · · · · · · · ·	<u> </u>
C. Enter new mailing address, if applicable:			— · (.**)
(Mailing address MAY BE A POST OFFICE BO	<u> </u>		
		· · · · · · · · · · · · · · · · · · ·	
		:7	ယ္
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D. If amending the registered agent and/or register new registered agent and/or the new registered.		e name of the	
	office address:		
Name of New Registered Agent			_
	(Florida street address)		_
New Registered Office Address:		, Florida	
New Negatives Office Huaress.	(City)	Zip (Code)
New Registered Agent's Signature, if changing Reg			
I hereby accept the appointment as registered agent.	I am familiar with and accept the obliga	ations of the position.	
Cion	ature of New Registered Agent, if change	ina	-
Signu	Aure of their negistered Agent, if Changi	mg	

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)

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.

Example:	ber	II. B	
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>	Name	<u>Addres</u> s
1) Change	S	SMITH, JUDITH	2557 NURSERY RD SUITE D
Add			CLEARWATER, FL 33764
X Remove			
2) Change			
Add			
Remove 3) Change	\$	LAURA G. HABNER	
X Add			2557 NURSERY RD SUITE D
Remove			CLEARWATER, FL 33764
4) Change	T	LAURA G. HABNER	
X Add			2557 NURSERY RD SUITE D
Remove			CLEARWATER, FL 33764
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

	(Be specific)
<u></u>	
	100000
- N-10	
<u>-</u>	<u> </u>
lf an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

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The date of each amendment(s) ad	10/10/2023 option:, if other than the
date this document was signed.	
	/2023
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors without shareholder action and shareholder
■ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	··
	(voting group)
DatedO Signature	-12-2023
(Bý a dir selectéd	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
i	AURA G. HABNER D.M.D.
-	(Typed or printed name of person signing)
I	PRESIDENT / SECRETARY / TREASURER
-	(Title of person signing)