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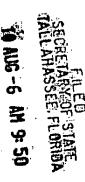
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	CARE TEAM DENTAL, INC.
DOCUMENT NUMBER:	P09000094969
The enclosed Articles of Amendment	and fee are submitted for filing.
Please return all correspondence conce	rning this matter to the following:
· 4	MICHELLE NEWMAN
•	Name of Contact Person
	<u> </u>
	Firm/ Company
	12251 NW 30TH STREET
	Address
CHAIR TO BE TO SEE SEE	SUNRISE, FLORIDA 33323 City/ State and Zip Code
E-mail address: For further information concerning this	REITZ1@BELLSOUTH.NET (to be used for future annual report notification)
JENNIE HOWITT Name of Contact Person	at (954) 735-7178 Area Code & Daytime Telephone Number
Enclosed is a check for the following a	mount made payable to the Florida Department of State:
✓ \$35 Filing Fee	· · · · · · · · · · · · · · · · · · ·
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

CARE TEAM DENTAL, INC.

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

P09000094969

(Document Number of Corporation (if known)

	of the corporation:	The
abbreviation "Corp.," "Inc.," or Co.," or t	the word "corporation," "company," or "incorpore he designation "Corp," "Inc," or "Co". A professional rofessional association," or the abbreviation "P.A."	
B. Enter new principal office address, if a	oplicable:	
Principal office address <u>MUST BE A STR</u>	<u>(ET ADDRESS</u>)	
•		_
C. Enter new mailing address, if applicate (Mailing address MAY BE A POST OF		- - -
(Mailing address MAY BE A POST OF	r registered office address in Florida, enter the name o	
(Mailing address MAY BE A POST OF	r registered office address in Florida, enter the name o	f the
(Mailing address MAY BE A POST OF	r registered office address in Florida, enter the name o	 f the
(Mailing address MAY BE A POST OF D. If amending the registered agent and/o new registered agent and/or the new re	r registered office address in Florida, enter the name o	 <u>f the</u>
(Mailing address MAY BE A POST OF D. If amending the registered agent and/o new registered agent and/or the new re	r registered office address in Florida, enter the name o	<u>f the</u>
(Mailing address MAY BE A POST OF D. If amending the registered agent and/o new registered agent and/or the new re Name of New Registered Agent	r registered office address in Florida, enter the name of gistered office address: (Florida street address)	<u>f the</u>
(Mailing address MAY BE A POST OF D. If amending the registered agent and/o new registered agent and/or the new ro	r registered office address in Florida, enter the name o	f the

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	Address	Type of Action
SEC	HILARY HUGHES	22005 MARTELLA AVE BOCA RATON, FL. 33433	☑ Adđ □ Remove
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	ling or adding additional Articles, editional sheets, if necessary).—(Be.		
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provisio		e, reclassification, or cancellation of nt if not contained in the amendmen	
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The date of each amendm	ent(s) adoption: 08/04/10
Effective date if applicable	- (date of adoption is required)
плестие часе <u>и аррисали</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
	were adopted by the shareholders. The number of votes cast for the amendment(s)/were sufficient for approval.
	were approved by the shareholders through voting groups. The following statemential for each voting group entitled to vote separately on the amendment(s):
"The number of vo	tes cast for the amendment(s) was/were sufficient for approval
. by	,,, ,,
•	(voting group)
action was not required. The amendment(s) was/action was not required.	were adopted by the incorporators without shareholder action and shareholder
Dated	8/3/16
Signature	Michelle Newman
	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)
	MICHELLE NEWMAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)