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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | s of Status |
| Special instructions to | Filing Officer: | |
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Office Use Only

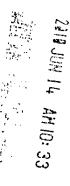
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COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Progressive Dental Office DOCUMENT NUMBER: P1000021110 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Fra @ P106(65) vedental of fice. (E-mail address: (to be used for future annual report notification For further information concerning this matter, please call: dee Sierra at (305) 558-3425

Name of Contact Person at (305) 558-3425

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

| Articles of Inc | orporation |
|---|--|
| of | Sola Sola Sola Sola Sola Sola Sola Sola |
| Progressive Dental Offi | ICO, COVP. |
| (Name of Corporation as currently filed with | the Florida Dept. of State) |
| Plomanalino | 19 19 19 19 19 19 19 19 19 19 19 19 19 1 |
| (Document Number of Corporat | tion (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation: | ites, this Florida Profit Corporation adopts the following |
| A. If amending name, enter the new name of the corporation | on: |
| NIA | The new |
| name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "C name must contain the word "chartered," "professional associ | Corp," "Inc," or "Co". A professional corporation |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | NA |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NIA |
| D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad- | |
| New Registered Office Address: (Flore | ida street address) |
| Tron in the state of the state | ind sireer addressy |
| (City) | , Florida |
| New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am family | |
| N | A |
| 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> | Name | Address | Type of Action |
|--------------|--|---|----------------|
| P | Estrada, Javier | 2035 SW 142 FVC HIOMI, I L 33175 | Add Remove |
| VP | Gurman, Jose A. | 7700 W. ZY AYC #7 Highcah, Fl 33010 | ☐ Add ☐ Remove |
| <u>SEC</u> | Gonzalez, Jose L. | 7750 (D. 24 AYE 424 HIGIEAH, FL 33011 | |
| | ing or adding additional Articles, enter ditional sheets, if necessary). (Be specif | | |
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| | | | |
| provisio | endment provides for an exchange, recl ns for implementing the amendment if r or applicable, indicate N/A) | | |
| 100 | % or shares to | o new Presid | ent. |
| Alex | xander Montero. | This corporat | lion is |
| | a denial office | • | |
| | be a Dentie | | |
| | and regula | | |
| | in the second se | | |

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> | Address | Type of Action |
|--------------|---|---|---------------------------------------|
| IR | Gurman, Jose M. | 7700' W. ZY AVC #7] Hialcoh, FL 33010 | ☐ Add ☐ Remove |
| P | Montero, Alexander | 18600 NW 87 AVE Suite 125 Migml, FL 33018 | Add Remove |
| | | | ☐ Add ☐ Remove |
| | ng or adding additional Articles, enter c litional sheets, if necessary). (Be specific | | |
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| provision | endment provides for an exchange, reclass for implementing the amendment if n | | |
| (if noi | t applicable, indicate N/A) | | |
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| The date of each amendment(s) adoption: May 12, 2010 |
|---|
| Effective date if applicable: (date of adoption is required) |
| (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. |
| I'he 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" |
| by" |
| 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 5 2 3000 |
| Signature (se a) mass |
| (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) |
| |
| (Typed or printed name of person signing) |
| (Typed or printed name of person signing) |
| Vice President |
| (Title of person signing) |