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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Majestic Dental Studios, Finc
DOCUMENT NUMBER: PIOOOO23069
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Daniel B. Dilley Name of Contact Person
Majestic Dental Studios, Ibc.
1009 N. Dixie Freeway, UnitB
New Smyrna Beach, FL 32/68 City/State and Zip Code
broulet @ cfl.rr. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Daniele Brouillette at (386) 690-0325 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status \$43.75 Filing Fee & Certificate of Status
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Ame	endment E. i.,
to Articles of Incor	noration
of	poration 10 AUS 10
Majestic Dentals	poration 10 AUG 18 AM 10: 4: c Florida Dept. of State) SECRETARY OF STATE C Florida Dept. of State
(Name of Corporation as currently filed with th	e Florida Dept. of State
(Document Number of Corporation	n (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation:	
nachone	The new
name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Contain the word "chartered," "professional associated	p." "Inc," or "Co". A professional corporation ion," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:	1009 N. Dixie Freeway, Unit &
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1009 N. Dixie Freeway, Unit & New Smyrna Beach, FL 32168
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	same as above
D. If amending the registered agent and/or registered office a	address in Florida, enter the name of the
new registered agent and/or the new registered office addi	
Name of New Registered Agent: DanielB	Dilley
New Registered Office Address: (Florid	. Dixle Freeway, UnitB a street address)
New S (City)	. Dixle Freeway, UnitB la street address) Myrna Beach, Florida 32168 (Zip Code)
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili	ent:
Davidh	Dille
Signature of Nev	legistered 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)

^I / \	<u>Name</u>	Address	Type of Action
(<u>W, (</u> O)	James McKenzieII	2944 Branford Rd. New Snormason, FL	Add Remove
			Add Remove
	litional sheets, if necessary). (Be specifi		
<u>provision</u>	endment provides for an exchange, reclass for implementing the amendment if no	essification, or cancellation of iss of contained in the amendment i	sued shares, itself:
<u>provision</u>	endment provides for an exchange, reclass for implementing the amendment if new applicable, indicate N/A)	ssification, or cancellation of iss of contained in the amendment i	sued shares, itself:
<u>provision</u>	s for implementing the amendment if n	essification, or cancellation of issociation of iss	sued shares, itself:

The date of each amendment(s) adoption: 200
Effective date if applicable: (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 east 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 stateme 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 shareholde action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 8 17 10
Signature Devil B. Delley (B. 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)
Title of person signing)