P10000063524

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(RM) 10-23-14

COVER LETTER

TO: Amendment Sec Division of Corp				
NAME OF CORPO	RATION: COLONY N	MODERN DENT	ISTRY, P.A.	
DOCUMENT NUM	_{BER:} P1000006352	4		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		_
	JOHN Q. ADAMS	3, II		1 1 PH 2: 13
		Name of Contact Person	n	907 T
	ADAMS & COMP	PANY, P.A.		
	·	Firm/ Company		P
	910 SW 1ST AVE	ENUE, SUITE 20	01	75 2
		Address		5 5
	OCALA, FL 3447	1		2× 0-
		City/ State and Zip Cod	e	
JO	HN@ADAMSCON	MPANYPA.COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
AMY PLANT	<u> </u>	_{at (} 352	237-3200	···
Name	of Contact Person	Area Co	de & Daytime Telephone Numb	per
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	

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 of

COLONY MODERN DENTISTRY, P.A.	
(Name of Corporation as currently filed with the I P1000063524	Florida Dept. of State)
(Document Number of Corporation ((if knowπ)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation;	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	₹CO →
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. BOX 1269
	GOTHA, FL 34734
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	lress in Florida, enter the name of the
Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address: (City	, Florida
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar Signature of New Registered	with and accept the obligations of the position.

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 PST and Mike Jones is listed as the PST and 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.

Mike Jones, V as Remove Example:	e, and Sai	lly Smith, SV as an Add.		
X Change	<u>PT</u>	John Doc		
X Remove	Y	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		OT II PH 2: 13
Type of Action (Check One)	Title	Name	<u>Addres</u> s	OT IL PH 2:13
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add			· · · · · · · · · · · · · · · · · · ·	
Remove			<u> </u>	<u> </u>
5) Change				
Add				
Remove				
6) Change			_	
Add		,		
Remove				

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	57
	32
	
	
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an amendment provides for an exchange, reclassification, or cancellation of Issu	ed shares,
rovisions for implementing the amendment if not contained in the amendment it	self:
(if not applicable, indicate N/A)	
	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
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 cast 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 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	8 1
by" (voting group)	
(voling group)	数
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	70 2
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	1 2: 13
Dated 18.14	
Signature	
(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)	
BEN M. SPIVEY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	-