

P/1000012868

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

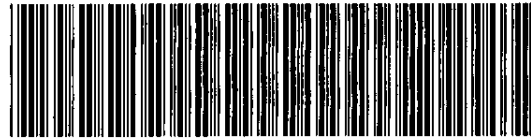
(Business Entity Name)

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11 AUG -3 PM 2:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*TK 8-3-11*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 20, 2011

JOSEPH A. POBLICK, ESQ.  
LAW OFFICES OF JOSEPH A. POBLICK  
6246 GALL BLVD  
ZEPHYRHILLS, FL 33542

SUBJECT: MATTHEW T. WAITE, D.D.S., M.S., INC.  
Ref. Number: P11000012868

We have received your document for MATTHEW T. WAITE, D.D.S., M.S., INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 211A00017215

RECEIVED

11 AUG -3 AM 9:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**THE LAW OFFICES OF JOSEPH A. POBLICK, P.A.**

**A PROFESSIONAL ASSOCIATION**

**ATTORNEY AT LAW**

**JOSEPH A. POBLICK†**  
† ALSO ADMITTED IN LOUISIANA  
AND WASHINGTON, D.C.

**6246 GALL BOULEVARD  
ZEPHRHILLS, FLORIDA 33542**

Writer's E-Mail Address:  
jap@poblicklaw.com

**TELEPHONE (813) 482-1288**

July 30, 2011

Florida Dept. of State  
Div. of Corp.  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Matthew T. Waite, D.D.S., M.S., Inc.  
Ref. No. P11000012868  
Articles of Amendment/Name Change

Dear Ms. Roberts:

Our apologies for sending in the Articles of Amendment without the requisite signature. Enclosed, please find the duly executed articles for filing. Dr. Matthew T. Waite, director of the corporation, has executed the articles. If you have any questions, please contact me at 813-482-1288

With kindest regards, I remain,

Sincerely,



Joseph A. Poblick

JAP/kmc

COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Matthew T. Watie, DDS, MS., Inc.

**DOCUMENT NUMBER:** P11000012868

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph A. Poblick, Esq.

Name of Contact Person

Law Offices of Joseph A. Poblick

Firm/ Company

6246 Gall Blvd

Address

Zephyrhills, Florida 33542

City/ State and Zip Code

jap@poblicklaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph A. Poblick, Esq.

Name of Contact Person

at ( 813 )

482-1288

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Matthew T. Waite, D.D.S., M.S., Inc.

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

P11000012868

(Document Number of Corporation (if known))

FILED

11 AUG -3 PM 2: 37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Matthew T. Waite D.D.S., M.S., P.A.

*The new*

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

\_\_\_\_\_

New Registered Office Address:

(Florida street address)

\_\_\_\_\_

\_\_\_\_\_, Florida

(City)

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

Art. III, Purpose. shall be amended as follows: "This Corporation is organized for the  
 purpose of engaging in every aspect of the practice of dentistry and  
 any and all other lawful business.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date of Amendment adopted 7/11/11 (date of adoption is required)

Effective date if applicable: 7/11/11

(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

by \_\_\_\_\_."  
(voting group)

☐ 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 \_\_\_\_\_

Signature

X \_\_\_\_\_  
(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)

X \_\_\_\_\_  
(Typed or printed name of person signing)

Director  
(Title of person signing)