P11000030485

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





900212263959

09/26/11--01024--011 **35.00

SECRETARY OF STALL SECRETARY OF CORPORALIONS

11 SEP 26 AM 9: 47

Amenda Mandell

Articles of Amendment tó **Articles of Incorporation** of

YCP DENTAL MANAGEMENT, INC

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

P110	000030485			*
(Document Num	ber of Corporat	ion (if known)		
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	, Florida Statu	tes, this Florida	Profit Corporation adop	ts the follo
A. If amending name, enter the new name of	the corporatio	<u>n:</u>		
	N/A			_The new
name must be distinguishable and contain t abhreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "C	orp," "Inc," or "	'Co". A professional co	
B. Enter new principal office address, if applicable:		1600 N State	Road 7	_
(Principal office address <u>MUST BE A STREE</u>	T ADDRESS)	Fort Lauderdale, FL 33313		
				•
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		1600 N State	Road 7	-
	-,	Fort Lauderda	ale, FL 33313	- -
D. If amending the registered agent and/or renew registered agent and/or the new regis			da, enter the name of th	<u>ıe</u>
Name of New Registered Agent:	GANGI, PET	ER		
	1600 N STA	TE ROAD 7		
New Registered Office Address:		ida street address		
	LAUDERHIL	L	, Florida 33313	3
-	(City)		(Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag	g Registered A	Agent: iliar with and acc	ept the obligations of the	position.
	,		• • • • • • • • • • • • • • • • • • • •	
	ignature of New	Registered Agent	,.if changing	
	, <u>23 ° j</u>	SWRF F	· •	

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
<u> </u>	Rodriguez DDS, PA, Nury	16459 NE 27th Ave N Miami Beach, FL 33160	_ ☐ Add ☐ ☑ Remove
<u>VPD</u>	GANGI, YCNADUI	16459 NE 27th Ave N Miami Beach, FL 33160	_ □ Add □ Remove
<u>VPT</u>	GANGI, PETER	1600 N STATE ROAD 7 LAUDERHILL FL 33313 US	_
(attach a	dditional sheets, if necessary). (Be spe	cific)	
provisi	mendment provides for an exchange, roons for implementing the amendment in applicable, indicate N/A)		
		,	

The date of each amendment(s)	adoption:	104.21	2011	
Effective date <u>if applicable</u> :		offadoption is reagin	red)	
(i	no mare than 90 days	after amendment file	date)	
Adoption of Amendment(s)	(CHECK C	<u>ONE</u>)		
The amendment(s) was/were by the shareholders was/were			of votes cast for the amend	ment(s)
The amendment(s) was/were must be separately provided j				
"The number of votes ca	st for the amendment(s	s) was/were sufficient	for approval	
by		.,,		
(v	oting group)			
The amendment(s) was/were action was not required.	adopted by the board o	of directors without sl	nareholder action and share	holder
The amendment(s) was/were action was not required.	adopted by the incorpo	orators without sharel	nolder action and sharehold	ier
Dated	ept. 21,	2011.		
selecte	director, president or ced, by an incorporator need houciary by that f	 if in the hands of a 	nots or officers have not be receiver, trustee, or other of	en court
-	Pet	er Gangi	a cionino)	
	(Typed or p	orinted name of perso	ແ ຈາຊີແແເຊັ <i>)</i>	
-	(Title of person	n signing)		
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	J 0.		