

PI10000073339

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 11 PM 1:58

Amend/cc
@ 10/11/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DENTAL MEDICAL SUPPLIES CORP.

DOCUMENT NUMBER: P11000073339

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

Please return all correspondence concerning this matter to the following:

RONALD MONAHAN
Name of Contact Person

MONAHAN-MIJARES CPA P.A.
Firm/ Company

2519 GALIANO STREET, STE 703
Address

CORAL GABLES, FL, 33134
City/ State and Zip Code

ronald.monahan@mma.com.vt
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RONALD MONAHAN at (305) 407-1438
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:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed) |
|--|--|--|---|

PAYMENT ALREADY SENT

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
SEP 27 2011

September 20, 2011

RONALD MONAHAN
MONAHAN-MIJARES, CPA, P.A.
2519 GALIANO STREET - SUITE 703
CORAL GABLES, FL 33134

SUBJECT: DENTAL MEDICAL SUPPLIES CORP.
Ref. Number: P11000073339

We have received your document for DENTAL MEDICAL SUPPLIES CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 911A00021758

RECEIVED
11 OCT 11 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

DENTAL MEDICAL SUPPLIES CORP.

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

P11000073339

(Document Number of Corporation (if known))

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:

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

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DIVISION OF CORPORATIONS
11 OCT 11 PM 1:58

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>
VP, S	BLIMA POPLICHER	19195 MYSTIC POINTE DR. APT 2606 AVENTURA, FL, 33180	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P, T	DAVID SINGER	19195 MYSTIC POINTE DR APT 2606 AVENTURA, FL, 33180	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
D, P	DAVID SINGER	19195 MYSTIC POINTE DR APT 2606 AVENTURA, FL, 33180	<input checked="" 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)

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)

The date of each amendment(s) adoption: 08/15/2011
(date of adoption is required)

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

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 10/07/2011

Signature David Singer
(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)

DAVID SINGER

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)