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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Dental Staffing Sol	lutions.com Inc.	
DOCUMENT NUMB	ER: P12000029121		
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
1	Wendy Paquette		
_		Name of Contact Person	1
_		Firm/ Company	
4	1326 Park Boulevard Suite C	-West	
-		Address	
I -	Pinellas Park FL 33781		
		City/ State and Zip Code	•
paquet	te@tampabay.rr.com		V
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Wendy Paquette		at ( <sup>727</sup>	547-8233
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment 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)
Amer Divis P.O.	ing Address  Indment Section Identification of Corporations Box 6327  hassee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Dental Staffing Solutions.com, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P12000029121 (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: Dental Staffing Solutions, Inc. 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 (Florida street address) New Registered Office Address: . Florida 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)

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 V. There is a change, 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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>			
X Remove	<u>V</u>	Mike Jo	nes			
X Add	<u>sv</u>	Sally Sr	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	
1) Change	S	_	Patricia L Bell	_	1840 WildRose Trail	
XAdd					Sanford, FL 32771-6441	
Remove						
2) Change	<u>s</u>	_	Rebecca Bedillion	_	7300 120th Avenue	
Add					Largo Fl 33773	
X Remove						
3) Change		_		-	·	
Add						
Remove						
4) Change		_		-		
Add						
Remove						
5) Change		<u> </u>		_		
Add						
Remove						
6) Change				_		_
Add						

Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· LOURNA LOUR	

	12/1/17
The date of each amendment(s)	doption:, if other than t
date this document was signed.	140
Effective date if applicable:	1/17
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date will not be listed as repartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes ca	t for the amendment(s) was/were sufficient for approval
by	.,
,	(voting group)
action was not required.  The amendment(s) was/were a	lopted by the board of directors without shareholder action and shareholder
action was not required.	
	director, president or officer – if directors of officers have not been
	ed, by an incorporator — if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
арро	need inductary by that inductary)
	Wendy Paquette
	(Typed or printed name of person signing)
	President
	(Title of person signing)