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COVER LETTER

Division of Corporations NAME OF CORPORATION: Federico Grande DDS, HD PA 46-2838212 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Federico Grande
Name of Contact Per Firm/ Company 8193 SE. Country Estates Way Jupiter, Florida 33458
City/ State and Zip Code Fedgl@bellsoth.net
E-mail address: (to 6 used for future annual report notification) For further information concerning this matter, please call: at (772) 631 - 9201
Area Code & Daytime Telephone Number ederico Grande Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filling Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address**

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dment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

₹	ederico	Grande	DDS, HD	PA
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(Name of Corporation as currently filed with the Florida Dept. of State)

46-2	1838212
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
AlA	The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc." or "C "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Corp.," [20] A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA.
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a Name of New Registered Agent	
	NA
	orida street address)
New Registered Office Address:	City) . Florida
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	
	NIA
Signature of	New Registered Agent, if changing
Check if annlicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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> <u>John</u>	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	v Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	V <u>CFO</u>	Nicole Grande	B193 S.E. Country Estates We
X Add			Jupiter, Florida 33458
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			2678 HUD
Remove			
5) Change			23
Add			
Remove			
6) Change		<u> </u>	
Add			<u></u>
Remove			

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The date of each amendment(s)	adoption:	MA	, if other than
date this document was signed.		,	
Effective date if applicable:		AA when the source of the sou	
	(no m	nore than 90 days after amendment f	ile date)
Note: If the date inserted in this document's effective date on the			irements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK (</u>	ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorpo	orators, or board of directors withou	shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were		olders. The number of votes cast for al.	the amendment(s)
		holders through voting groups. The entitled to vote separately on the an	
		t(s) was/were sufficient for approval	
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Dated	Blialas		
Signature		France	
(By a		other officer - if directors or office	
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		or printed name of person signing)	7 22
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