Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SPIEGEL & UTRERA, P.A.

Account Number : FCA000000001 : (305)854-6000

Fax Number : (305)860-2076

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ALVA DENT, INC.

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8/18/2014

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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: ALVA DE	ENT, INC.				
DOCUMENT NUMBER: P14000061	587				
The enclosed Articles of Amendment and fee are st	abmitted for filing.				
Please return all correspondence concerning this ma	itter to the following:				
Ranjiv Sondhi					
Name of Contact Person Spiegel & Utrera, P.A.					
opiegei a oti e	Firm/ Company				
1840 Coral Wa	• *				
	Address				
Miami, FL 331	Miami, FL 33145				
	City/ State and Zip Code				
hammami.ghadi@gmail.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Ranjiv Sondhi	at(_305) 854-6000				
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:					
■ \$35 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certified to F Status Certified Copy (Additional Copy is enclosed)				
Mailing Address	Street Address				
Amendment Section Division of Corporations	Amendment Section				
P.O. Box 6327	Division of Corporations Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				
Tallahassee, FL 32301					

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THE EU
SHEKETARY OF STATE
BIVISION OF CORPORATIONS

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Articles of Amendment Articles of Incorporation

ALVA DENT, INC.
(Name of Curporation as currently filed with the Florida Dept. of State)
P14000061587
(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) tits 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". 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
THE PARTIES OF THE PA
(Flavida street address)
New Registered Office Address:, Florida,
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I heroby 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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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:

(Assach 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 = Chairmon 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, Transurer, 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 Doc. PT as a Change. Mike Jones, V as Remove, and Sally Smith. SV as an Add.

Example: X Change	PI	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
I) Change	SD	Ghalla Hammami	1840 SW 22nd Street
Add	_		PMB 4-958
Remove			Miami, FL 33145
2) Change	TD	Ghaith Hammami	1840 SW 22nd Street
Add			PMB 4-958
Remove		•	Miaml, FL 33145
3) Change	VSD	Mohamad Hamami	1840 SW 22nd Street
Add	_		PMB 4-958
Remove			Miami, FL 33145
4) Change	PTD	Mhd Ghadi Hammami	1840 SW 22nd Street
Add			PMB 4-958
Remove			Miami, FL 33145
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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s. reciassification, or ent if not contained i	cancellation i the amenda	of issued shar nent itself:	<u>'et,</u>
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SPIEGEL & UTRERA PA

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FILEU SUBSCIARY OF STATE SUPPRIOR OF CORPORATIONS

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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 doys 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 withour thareholder action and shareholder action was not required.	
Dated 8/7/2014	
Signature	
(By a director, president or other afficer - 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)	
Mhd Ghadi Hammami	
(Typed or printed name of person signing)	
President	
(Title of person signing)	*