## P15000017689

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: PAUL KOL	ODZIES DMD, I	P.A.					
DOCUMENT NUMBER: P1500001768	9						
The enclosed Articles of Amendment and fee are sul	bmitted for filing.						
Please return all correspondence concerning this mat	ter to the following:						
PAUL THAYIL, C	PA						
	Name of Contact Person						
PAUL THAYIL, CPA, PA							
	Firm/ Company						
5400 S UNIVERSITY DRIVE SUITE 601							
Address							
DAVIE, FL 33328	DAVIE, FL 33328						
	City/ State and Zip Code						
PTHAYILCPA@IFRII	ENDLY.COM						
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, pleas	e call:						
PAUL THAYIL CPA	at (954	, 432-1099					
Name of Contact Person		de & Daytime Telephone Number					
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment 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)					
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						

## Articles of Amendment to Articles of Incorporation of

FILED

			<b>ጊ</b> և
(Name of Corporation as currently	filed with the Florida Dept. of Stat	e) 2015 HAR - 2 PH 4:	34
PAUL KOLODZIES DMD, P.A.		TOTAL SEE. FLOR	TE
(Document Number	of Corporation (if known)	TALL THE SEE. FLOR	(IUA
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this Florida Profit Corpo	oration adopts the following ar	nendment(s)
A. If amending name, enter the new name of the	corporation:		
PAUL KOLODZIEJ, DMD, P.A.		Ti	ie new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or the contact of the contact	orp," "Inc," or "Co". A professiona he abbreviation "P.A."	"incorporated" or the abbre	eviation
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)			
<u> </u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	BOX)		
		<del></del>	
D. If amending the registered agent and/or regis		r the name of the	
new registered agent and/or the new registere	ed office address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		bligations of the position.	
7		g y	
Cionatuus of	New Registered Agent, if changing		
Signature of	THEN RESISTED EN AREIN, IJ CHUNKING		

## 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		
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

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f an amendment provides for an exchange or an exchange of the amend of	nge, reclassificat ment if not cont	on, or cancellatio	n of issued shares dment itself:	<b>.</b>
				·
	<del></del>	,		
		<u> </u>	_ <del></del>	
				<del></del>

The date of each amendment	(s) adoption: 2/20/2015	, if other than the
date this document was signed  Effective date if applicable:	2/20/2015	
Enecuve date il applicable:	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated 2/24	1/2015	
Se	by a director, president of other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	<del></del>
	PAUL KOLODZIEJ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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