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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ____ DR. TANER C. SAYIN, DDS, P.A. **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: F. KENNETH TOMEK Name of Contact Person F. KENNETH TOMEK, CPA Firm/ Company 10100 WEST SAMPLE RD. SUITE 300 Address CORAL SPRINGS, FL 33065 City/ State and Zip Code sayin@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: F. KENNETH TOMEK Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

State)

DR. TANER C. SAYIN, DDS, P.A.			The May to
(<u>Name</u> e	of Corporation as curren	tly filed with the Florida Dept. of State)	
F10000013734	(Degument Number	of Corporation (if known)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(Document Number of	of Corporation (II known)	~;
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
TANER CEM SAYIN, DDS, PhD, P.A.			The new
	nation "Corp," "Inc," or		the abbreviation
B. Enter new principal office address,		4080 FERN FOREST RD.	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	COOPER CITY, FL 33026	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4080 FERN FOREST RD.	
		COOPER CITY, FL 33026	
D. If amending the registered agent an new registered agent and/or the ne			
Name of New Registered Agent	N/A		
	(Florida s	treet address)	
New Registered Office Address:	4080 FERN FOREST RI	O. COOPER CITY . Florida 33	3026
		(City)	(Zip Code)
New Registered Agent's Signature, if o		<u>it:</u>	
i nereby accept the appointment as regis	iered agent. I am familiai	with and accept the obligations of the pos	ниоп.
	01 (21)		<u>.</u>
	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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			···
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
N/A				
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) N/A				

	03/05/16	
The date of each amendment date this document was signed.		, if other than the
Effective date if applicable:	03/05/16	
Effective date in appricable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date ne Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	."	
,	(voting group)	
☐ The amendment(s) was/wer 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	
03/05	/16	
Dated		
Signature	C/am_C Again	
	y a director, president of other officer – if directors or officers have not been	
Se	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
ар	ppointed fiduciary by that fiduciary)	
	TANER C. SAYIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	