

P 16000031811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

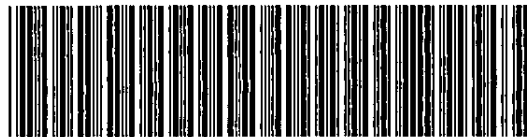
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. GOLDEN

MAY 31 2017

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Bayview Dental Inc.  
Name of Corporation

DOCUMENT NUMBER: P16000031811

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John DeStefan  
Name of Contact Person  
Commercial Cosmetic Dentistry  
Firm/Company  
3000 E Commercial Blvd  
Address  
Ft Lauderdale FL 33308  
City/State and Zip Code  
jldental@outlook.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John DeStefan at (954) 463 7262  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bayview Dental Inc.
2. The principal office address: 3000 E Commercial Blvd  
Fort Lauderdale FL 33308
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 4/8/16 Document number: P16000031811

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporate Creations Network Inc  
11380 Prosperity Farms Road #221E  
Palm Beach Gardens FL 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

John DeStefan  
3000 E Commercial Blvd  
P.O. Box NOT acceptable  
Fort Lauderdale FL 33308

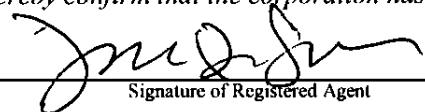
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

John DeStefan  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

5/18/17  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FILED  
2017 MAY 25 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA