P16000058531

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Ileana Arias, DDS,	, CORP	
DOCUMENT NUME	BER: P16000058531	·	·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Ileana Arias		
	Tiedite / Vites	Name of Contact Persor	1
	·	Firm/ Company	
	1518 SW 29th ST		
		Address	
	Fort Lauderdale, FL	G: 10: 17: C 1	
		City/ State and Zip Code	
	arias_ileana@hotmail.com E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Ileana Arias		at (<u>64</u> 6) 3999049
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divi P.O.	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee. FL 32303

Articles of Amendment to Articles of Incorporation of

Ileana Arias, DDS CORP	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P16000058531	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
PEREZ ARIAS DDS CORP	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1518 SW 29TH ST
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33315
	721
C. Enter new mailing address, if applicable:	f remains
(Mailing address MAY BE A POST OFFICE BOX)	1518 SW 29TH ST
	FORT LAUDERDALE, FL 33315
	SAME
	SASIE
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>38:</u>
Name of New Registered Agent N/A	
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
The ec, acceptine appearance as regime of agent, and	and the second s
Signature of New	Registered Agent. if changing
Check if applicable	
☐ 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 Does PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	<u>PT</u>	John Doe		3 7
X Remove	<u>v</u>	Mike Jones		- m
X Add	<u>sv</u>	Sally Smith		3
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	2:42
1) Change		N/A		
Add				
Remove				
2) Change				
Add			_	
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove			****	
5) Change				
Add			<u>-</u>	
Remove				
6) Change				
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
ONLY CHANGING THE NAME OF THE COMPANY EVERYTHING ELSE STAY THE SAME			
			_
	-		
		2021 HAR	
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		- 120 - 1	:
		<u>-</u>	•
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,		42	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)			
MA			
		 -	

The date of each amendment(s) adoption: 02/01/2021	if other than the
date this document was signed.	
Effective date if applicable: 02/01/2021 (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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.	20'
☐ 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):	7021 HAR -
"The number of votes cast for the amendment(s) was/were sufficient for approval	·
by N/A	TO 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
(voting group)	2: 42
Dated 2 4 202	2
Signature (By a director, president or other officer – 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)	
ILEANA ARIAS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	