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NOV - 9 2016 C LEWIS

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORA	TION: FLORIDA	DENTAL HO	QUISITIONS, P.F
DOCUMENT NUMBE	r: <u>P160000</u>	83288	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	Anthony 1	Name of Contact Person	n A
_	Elorida De	Firm/ Company	uisitions, P.A.
7	475 Beach	Ave	
4	Atlantic B	Address City/ State and Zip Cod	32233
_A	E-mail address: (to be us	rcalo Gmas sed for future annual report	notification)
For further information c	concerning this matter, pleas	se call:	
Anthony Name of	Contact Person	at (QOH Area Co	de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	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)
Mailin	ın Addross	Street	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 Taliahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

SEURE TARY OF STATE JOYUSON OF CORPORATION

2016 NOV - 7 PM 1: LO (Name of Corporation as currently filed with the Florida Dept. of State) (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) to its 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.," or the designation "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 (Florida street address) Florida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	PT Johr	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change	<i>PSD</i>	ANDREW	1475 Beach Ave
Add		DORMESHIAN	Atlantic Beach
<u>✓</u> Remove			FL 32233
2) Change			
Add			
Remove			
3) Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).			
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If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellati	on of issued shares, ndment itself:	
(if not applicable, indicate N/A)	. ^		0
Andrew Dormesh	ian 15 no long	ter an or	- Janeary
Florida Dental A nave been trans	roughors PA.	ind all <	harcs Crook
have bosen trans	lened to Ant	nary (o	val.
	3	7	
A	Andrew Darme	.1 '	11/2/16
1 March 2	Anthony Corral	<u> </u>	110
17714	THE CONTRACT		
			11/2/11/
			11/2/16

The date of each amendment(s) adoption:	, if other than the
late this document was signed. Effective date if applicable:	ric ED EURETARY OF STATE ENVISION OF CORPORATION
(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, t document's effective date on the Department of State's records.	2016 NOV - 7 PM 1: 40 his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st 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	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	cholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	ler
1/21/16	
Dated 11 2 14	
Signature Aty M	
(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 othe	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	