P11000058012

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Amendee

SEP 2.7 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section

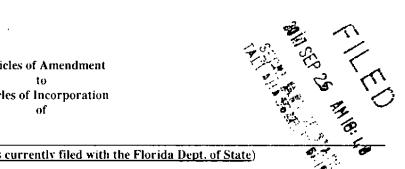
Division of Corporations

NAME OF CORPORATION: Tirth Dental P.A DOCUMENT NUMBER: P17000058012 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WALTER H. MESSICK Name of Contact Person GALVAN MESSICK, PLLC Firm/ Company 951 YAMATO RD. SUITE 250 Address BOCA RATON, FL 33431 City/ State and Zip Code MESSICKW@GALVANMESSICK.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 994-5956

Area Code & Daytime Telephone Number WALTER H. MESSICK Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 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 P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



TIRTH DENTAL, P.A.

iled with the Florida Dept. of State)
orporation (if known)
orida Profit Corporation adopts the following amendment(s)
_
The newTo remain the company," or "incorporated" or the abbreviation
". A professional corporation name must contain the 4."
8640 E COUNTY ROAD 466, UNIT B
THE VILLAGES, FL 32162
8640 E COUNTY ROAD 466, UNIT B
THE VILLAGES, FL 32162

s in Florida, enter the name of the
address)
, Florida
ity) (Zip Code)
ις) (Σίρ Code)
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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	DPTS	AGRAWAL, DHIREN DDS	
Add X Remove			
2) X Change	DPTS	PATEL. DAVEN DDS	
Add			-
Remove 3) Change	D	PATEL. RISHIT DMD	1480 HAMMOCK RIDGE RD
X Add	 ,		APT # 4208
Remove			CLERMONT, FL 34711
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
1VA
· · · · · · · · · · · · · · · · · · ·
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

t ne date of each amendment(s) a date this document was signed.	doption:, if other than th
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated Signature/	9/13/17
selecte	tirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
	DAVEN PATEL, D.D.S
	(Typed or printed name of person signing)
	DIRECTOR
	(Title of person signing)