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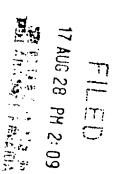
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## **COVER LETTER**

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TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: SPANISH SPRIN	GS DENTAL, P.A.	
DOCUMENT NU	MBER: P17000066425		
	eles of Amendment and fee are s	ubmitted for filing.	
Please return all co	orrespondence concerning this m	atter to the following:	
	NICHOLAS A NARDUCC	1	
		Name of Contact Person	n
	NARDUCCI DENTAL WE	ST, P.A.	
	<del></del>	Firm/ Company	
	2801 ST JOHNS BLUFF R		
		Address	
	JACKSONVILLE, FLORII		
	- JACKSON VILLE, FEORIT		
		City/ State and Zip Cod	e
И	NARDUCCI@NARDUCCIDE	NTAL.COM	
_	E-mail address: (to be t	ised for future annual report	notification)
For further informa	ation concerning this matter, plea	ise call:	
NICK NARDUC	CI	904	626-6025
Na	ne of Contact Person	at ( Area Co	de & Daytime Telephone Number
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artinent 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)
, 1 !	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED 17 AUG 28 PM 2: 09

SPANISH SPRINGS DENTAL, P.A.

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P17000066425	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, th its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
EAST HAMLET DENTAL, P.A.	The new
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
P. Entag new principal office address: if applicables	N/A
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
D. If amending the registered agent and/or registered office ad	ldress in Florida, enter the name of the
new registered agent and/or the new registered office addre	ess:
Name of New Registered Agent N/A	
(Florida	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	
I hereby accept the appointment as registered agent. I am familia	r 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	<u>PT</u>	John De	<u>oe</u>	
X Remove	¥	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) N/A Change		<del>_</del>	N/A	
Add				<del> </del>
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change				<del></del>
Add				
Remove				
5) Change		_		
Add				<del> </del>
Remove				
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here:  (Be specific)
N/A	
1. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Tanker II 100 Constituted in the Willer Constitute Cons
N/A	

	23 AUGUST 2017	
The date of each amendmen date this document was signed	t(s) adoption:	, if other than the
date ans document was signed	23 AUGUST 2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date he Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
23 A Dated	UGUST 2017	
Signature	2000	
( <b>i</b> s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	NICHOLAS A NARDUCCI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	