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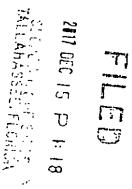
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DEC 1 8 2017 T. LEANEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Winter Springs Jamily Dental Corporation
DOCUMENT NUMBER: PITUUU 95562
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alex A. Planes, DDS Name of Contact Person Planes Dental Arts Firm/Company 4755 Highway AIA Address Vero Beach, 71, 32962 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Alex A. Planes, DDS at 305, 613-3615 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
□ \$35 Filing Fee
Mailing Address Street Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

Corperation P17000005562

(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation Name must be distinguishable and contain the word "corpor" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," word "chartered," "professional association," or the abbreviati	Dental, P.A., The new ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered office and new registered agent and/or the new registered office add Name of New Registered Agent	
THE THE TAX STREET STREET	
(Florid	la street address)
<u>New Rogistered Office Address</u> :	, Florida
New Registered Agent's Signature, if changing Registered As I hereby accept the appointment as registered agent. I am famili Signature of No.	

address of each Officer: (Attach additional sheets, Please note the officer/dir P = President; V= Vice i Executive Officer; CFO held. President, Treasure Changes should be noted	and/or D if necess rector titl President = Chief I r, Directo in the fo ves the c	rector being added: (ary) (a by the first letter of the office title: (b) The Treasurer; S= Secretary; D= Director; The officer of the officer of the officer of the or would be PTD. (b) Would be PTD. (c) Would be PTD. (d) Would be PTD. (e) Would be PTD. (e) Would be PTD. (f) Would be PTD.	fficer/director being removed and title, name, and FR= Trustee; C = Chairman or Clerk; CEO = Chiefmore than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change.
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			

____ Add

____ Remove

COLLOCO	in	Real	Estate
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	<u>_</u> _		
amendment provides for visions for implementing	r an exchang the amendn	e, reclassification tent if not contain	, or cancellation of issued shares, ed in the amendment itself:
(if not applicable, indicat	te N/A)		
A	.		
- - · · · · · · · · · · · · · · · · · ·			
		<u> </u>	

The date of each amendment(s) adoption: 13-13-17 if other than the
date this document was signed.
Effective date if applicable:
(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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ 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.
☐ 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):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 12-12-17
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)
Dr. Alex A. Planes, DDS (Typed or printed name of person signing)
President (Title of person signing)