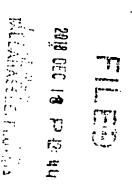
P17000098243

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

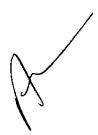
Office Use Only



400317577644



DEC 1 9 2018 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CARMONA PED	IATRIC DENTISTRY, PA		
DOCUMENT NUMB	ER: P17000098243			
	of Amendment and fee are su	abmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	FRANCIS MARTINEZ CAI	RMONA		
•		Name of Contact Person	n	
		Firm/ Company		
	8870 LAKEVIEW PL			
•		Address		
	PARKLAND, FL 33076-412	21		
•		City/ State and Zip Cod	e	
fragel	a@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
FRANCIS MARTINEZ CARMONA		786	597-2199	
Name o	f Contact Person	at (786) 597-2199 Area Code & Daytime Telephone Number		
Enclosed is a check for	the 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301



September 7, 2018

FRANCIS M CARMONA 8870 LAKEVIEW PL PARKLAND, FL 33076-4121

SUBJECT: CARMONA PEDIATRIC DENTISTRY, PA

Ref. Number: P17000098243

We have received your document for CARMONA PEDIATRIC DENTISTRY, PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

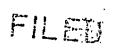
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 618A00018554

Tracy L Lemieux Regulatory Specialist II

OUBDEC 17 PM 8: 5

Articles of Amendment to Articles of Incorporation of



CARMONA PEDIATRIC DENTISTRY, PA

(Name of Corporation	on as currently filed with the Florida Delit 3f Signe P 12: 45
P17000098243	
	nent Number of Corporation (if known) TALLAPA SEE (LUN-174
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the con	orporation:
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	The new rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u> </u>
D. If amending the registered agent and/or register- new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.	<u>vistered Agent:</u> I am familiar with and accept the obligations of the position.
Simu	nature 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	<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	P,D	FRANCIS MARTINEZ FRAGELA	8870 LAKEVIEW PL
Add			PARKLAND, FL 33076-4121
XX Remove			
2) Change	P,D	FRANCIS MARTINEZ CARMONA	8870 LAKEVIEW PL
XX Add			PARKLAND, FL 33076-4121
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· —
6) Change			
Add			
Remove			

If amending or adding addition: Attach additional sheets, if necess	ary). (Be spec	ific)			
					
			==		
	· -			_	
				<u></u>	
 					
				- <u>-</u> -	
					
					
<u> </u>					
			<u> </u>		
f an amendment provides for a provisions for implementing th	e amendment if	not contained i	in the amendme	nt itself:	
(if not applicable, indicate N	%4)				
					
		 			

	DECEMBER 10,2018	
The date of each amendment(s) a date this document was signed.	adoption:	, if other than t
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date widepartment of State's records.	ll not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were acaction was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
DECEN	MBER 10, 2018	
Dated Signature	Pallin	
(By a	director, 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 inted fiduciary by that fiduciary)	
	FRANCIS MARTINEZ CARMONA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	