(Requ	uestor's Name)	
(Addı	ress)	
lbbA)	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	Mait	MAIL
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
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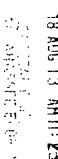
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Craig Lustman DDS PA
DOCUMENT NUMBER: P18000052491
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
craig Lustman
Name of Contact Person Crais Lustman DDS
3184 String RD Unit DI
Hollywood FL. 33021 City/ State and Zip Code
Craiglustman Example Com L E-mail address: (to be used for future and ual report notification)
For further information concerning this matter, please call:
Craig Ustman at (40) 804-8380 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 Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Certified Co
 Mailing 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

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Craig Lustman DOS PA				
(Name of Corporation as currently f	led with the Florida	Dept. of State)		
P18000052491				
(Document Number of Co	orporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	orida Profit Corporatio	on adopts the fo	llowing amer	ndment(s) to
A. If amending name, enter the new name of the corporation:				
	nla		The	9 /10
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co word "chartered," "professional association," or the abbreviation "P.	". A professional cor		the abbrevi must contain	ation
B. Enter new principal office address, if applicable:	N 10	: َ	8	
(Principal office address MUST BE A STREET ADDRESS)	 		ත	<u></u>
				T T
			7	-
C. Enter new mailing address, if applicable:			=	
(Mailing address MAY BE A POST OFFICE BOX)	N 1 (λ	- PG	
				,
D. If amending the registered agent and/or registered office address	s in Florida, enter the	name of the		_
new registered agent and/or the new registered office address:	0.1			
Name of New Registered Agent	<u> </u>			
(Florida street	address)			
New Registered Office Address:		, Florida		
(Ci	(y)		(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent. I am familiar with	and accept the obliga	tions of the pos	rition.	
Signature of New Regi	stered Agent, if change	ing		

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	\vee	Prebecca Lustman	3184 Stirling RO Unit DI
X Add			unit DI
Remove			Hollywood, FC. 3302
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			-
Add			
Remove			

If amending or adding additional A Attach additional sheets, if necessary). (Be specific)	ECIST HELE.		
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-	<u> </u>	·		
f an amendment provides for an expressions for implementing the ex-	change, reclassific	ation, or cancellation	of issued shares,	
provisions for implementing the ar (if not applicable, indicate N/A)	nenument it not co	ontained in the amend	iment itself:	
		Na		
		V 1 (V)		
		- · · · · · · · · · · · · · · · · · · ·		<u>.</u>
				
	_			
				

The date of each amendment(s) adoption: \[\frac{\frac{1}{3} \left[07 \left] \frac{201 \frac{8}{3}}{3} \] date this document was signed.	, if other than the
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 document's effective date on the Department of State's records.	II 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 amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting arrange. The fellowing 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)	
(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 8/7/2018	
• 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)	
Craig Lustman	
(Typed or printed name of person signing)	
President	
(Title of person signing)	