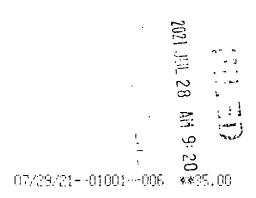
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DENTAL HOLISTIC,	. P.A.			
		}		
				Amortina Cilo
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
		j		Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
		,		Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
				Vehicle Search
				Driving Record
Requested by: Seth	07/27/21			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
				UCC II Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Dental Holisite, P.	Α	
DOCUMENT NUMB	ER: <u>P21000064894</u>		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	condence concerning this ma	tter to the following:	
	Jonathan Steszewski, Esq.		
		Name of Contact Person	
!	Steszewski Medina, P.A.		
~		Firm/ Company	
	15100 NW 67 Ave. Suite 200)	
-		Address	
	Miami Lakes, FL 33014		
-	Wildin Edges, IE 55014	City/ State and Zip Code	
		•	
_	jonathan@steszewskimedina	.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
		at (1
Name o	f Contact Person	Area Coo) de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Dental Holistic, P.A.		
(Name of Corporation as c	currently filed with the Florida De	pt. of State)
P21000064894		
(Document Nu	umber of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	ation:	
1.2	···	The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp.," "Inc," or "chartered," "professional association," or the abbreviation	Co". A professional corporation	" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2
the same of the sa		
	<u> </u>	
		· · · · ·
		22
D. <u>If amending the registered agent and/or registered offices new registered agent and/or the new registered offices</u>		ame of the
new regimenes agent author the new registered office	nuui cas.	
Name of New Registered Agent		
(Flo	orida street address)	
New Registered Office Address:		. Florida
CE!! Negalered Office Address.	(City)	(Zip Code)
		, ,
New Registered Agent's Signature, if changing Registered	d Agent:	
I hereby accept the appointment as registered agent. I am fa	muliar with and accept the obligation	ns of the position.
Signature of	f New Registered Agent, if changing	
	,	
Check if applicable	(L.) () O	
The amendment(s) is/are being filed pursuant to s. 607.012	20 (11) (e), F.S.	

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)

Example:

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.

X Change	PT John D	<u>roe</u>	
X Remove	V Mike J	ones	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Presiden	Filiberto Herdocia	8500 W. Flagler St., Suite B202
Add			Miami, FL 33144
X Remove			
2) Change	Presiden	Abel O. DeAnna	8500 W. Flagler St., Suite B202
XAdd			Miami, FL 33144
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
		
		
		
-		
If an amendme	ent provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for	implementing the amendment if not contained in the amendment itself:	
(у пог црр	neave, include 1177	
		
······································		

• •

The date of each amendment(s) ad late this document was signed.	option:	, if other than th
Effective date <u>if</u> applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, the partment of State's records.	his date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoraction was not required.	pted by the incorporators, or board of directors without shareholde	er action and shareholder
The amendment(s) was/were ado by the shareholders was/were sul	pted by the shareholders. The number of votes cast for the amendaticient for approval.	ment(s)
must be separately provided for (roved by the shareholders through voting groups. The following steach voting group entitled to vote separately on the amendment(s)	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(
Dated	-	
selected	rector, president or other officer – if directors or officers have not , by an incorporator – if in the hands of a receiver, trustee, or othered fiduciary by that fiduciary)	
_	Louethen Steszunsur	
	(Typed or printed name of person signing)	
_	Reguster Agent	
	(Title of person signing)	