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S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	ATION: Juan Fajardo [MD Corp		
DOCUMENT NUMBE	ER:P24000029776		<u> </u>	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this matter to the following:				
		Juan Fajardo		
-		Name of Contact Persor	1	
_		Juan Fajardo, DMD, PA Firm/ Company		
		Time Company		
_		2326 NW 186th Avenue		
		Address		
	Pembroke Pines, FL 33029			
		City/ State and Zip Code	e	
_		juanfajardo94@yahoo.com		
	E-mail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, please call:				
Miguel J. R	odriguez	at (<u>954</u>) 680-6114	
Name of	Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for t	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)	
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of Juan Fajardo DMD Corp			2024	
			<u></u>	
(Name of Corporation as currently filed with the Florida Dept. of State)			22	
P24000029776				-
(Docur	ment Number of Corporation (if known)		ب	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following	owing am		nt(s) to
A. If amending name, enter the new name of the co	orporation:			
Juan Fajardo, DMD, PA		The	new	
	orporation," "company," or "incorporated" or the abbre " or "Co". A professional corporation name must co eviation "P.A."			
B. Enter new principal office address, if applicable	e: N/A			
(Principal office address MUST BE A STREET ADI	DRESS)			
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>N/A</u>			
D. If a series the series and series and series and series are series and series are series and series are series and series are ser				
D. If amending the registered agent and/or register new registered agent and/or the new registered				
	.			
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 Reg I hereby accept the appointment as registered agent.	vistered Agent: I am familiar with and accept the obligations of the posit	ion.		
	N/A			
Sign	ature of New Registered Agent, if changing			

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (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)

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	$\underline{\mathbf{v}}$	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		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Remove		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)
Article III is hereby being amended to read as follows: The Corporation is a Professional Service Corporation as permitted
under the Florida Statutes and will be engaged in every aspect of rendering professional services to the public that a dentist,
duly licensed is authorized to render.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

E. If amending or adding additional Articles, enter change(s) here:

The date of each amendment(s) addate this document was signed.	option:		, i	f other than the
Effective date if applicable:	4/25/2024			
Enecuve date it applicable.		ter amendment file date)		
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable state or artment of State's records.	autory filing requirements, this date	will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
☑ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of	directors without shareholder action	and shar	eholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number	of votes cast for the amendment(s)		
	roved by the shareholders through vot each voting group entitled to vote sepa		t	
"The number of votes cast	or the amendment(s) was/were suffici	ent for approval	*	63
by		."	<u> </u>	2024 JUH 28
	(voting group)		,	<u> </u>
,	,		i.	55
/ //	24 2024		1	8
✓ Dated <u>& / </u>	4 2021		,	P ₂
,	α		C:	လ် <u>T</u>
✓ Signature	(/-fishing U/		<u></u>	 (4)
	ector, president or other officer - if d		-	a)
	by an incorporator – if in the hands of	of a receiver, trustee, or other court		
арропи	ed fiduciary by that fiduciary)			
	Juan J. Fajardo			
•	(Typed or printed name of	person signing)		
	President			
_	(Title of person signing)			