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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

	•
NAME OF CORPORATION: _	NORTH MIAMI DENTAL, INC.
DOCUMENT NUMBER:	P94000044326
The enclosed Articles of Amendme	ent and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
BERNARI	) KOPET
	Name of Contact Person
BERNARI	C KOPET P.A.
	Firm/ Company
20170 -	THE DIVID AND A
20170 F	PINES BLVD - SUITE #302 Address
PEMBROK	E PINES, FL 33029
	City/ State and Zip Code
DEDNADD	VODOS OF COM
E-mail addi	ess: (to be used for future annual report notification)
For further information concerning	this matter, please call:
BERNARD KOPET	at ( <u>954</u> ) <u>441-0403</u>
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following	ng amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of	
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation** of

ANS SEE PESTANDOSS NORTH MIAMI DENTAL, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P94000044326

, (Document Num	ber of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this <i>Flo</i>	
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if app	licable:	
Principal office address <u>MUST BE A STREE</u>	<u>TADDRESS</u> )	
	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
D. If amending the registered agent and/or renew registered agent and/or the new regis		Florida, enter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address:	(Florida street ac	Idress)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changin	g Registered Agent:	
hereby accept the appointment as registered as		d accept the obligations of the position.
Si	ignature 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>V/P</u>	RONALD MARROCCO	610 NE 124th STREET NORTH MIAMI, FL 3310	X Add 61 □ Remove
SECR.	EMMA MARROCCO	610 NE 124th STREET	XIXI Add L61□ Remove
			_
E. If amend	ding or adding additional Articles, dditional sheets, if necessary). (Be	enter change(s) here:	
		1	
provisi		ge, reclassification, or cancellation of in ent if not contained in the amendment	
<del></del>			

The date of each amendment(s	
	(date of adoption is required)
Effective date if applicable:	
-	(no more than 90 days after amendment file date)
•	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statemer for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	·
	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
action was not required.	adopted by the medipotators without shareholder action and shareholder
	LY 7, 2009
Signature	Souph Mann
(By a	director, president or other officer - if directors or officers have not been
	ted, by an incorporator - if in the hands of a receiver, trustee, or other court
appoi	nted fiduciary by that fiduciary)
	JOSEPH MARROCCO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)